

International Admissions  
Campbell University  
P.O. Box 249  
Buies Creek, NC 27506  
1-800-334-4111 ext. 1417  
Fax: 910-893-1288  
intl@campbell.edu



Campbell University  
SEVIS School Code:  
ATL 214F10052000

### F-1 Student Transfer Form to Campbell University

**TO THE STUDENT:** Before we can issue you a Certificate of Eligibility for an F-1 status to transfer to Campbell University, we must have copies of your current immigration documents: SEVIS I-20, passport, F-1 Visa and I-94. Please sign this form and ask the International Student Affairs at the school you are currently attending (or most recently attended) to complete and mail to Campbell University. Your current school must update your record in the SEVIS system as a "transfer out" and indicate a Transfer Release Date. This form is needed before International Admissions can issue an I-20 from Campbell University.

#### Section 1: TO BE COMPLETED BY STUDENT

Student's Name (print) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last/family First/given Middle

Telephone Number: ( ) \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

Birth date (mm/dd/yyyy): \_\_\_\_\_ Current Visa Status: \_\_\_\_\_

Country of Birth : \_\_\_\_\_

U.S. Mailing Address: \_\_\_\_\_

I plan to start my program (indicate year in the blank): \_\_\_\_\_ Fall \_\_\_\_\_ Spring

Will you be leaving the U.S. before enrolling at Campbell University?  Yes  No

I grant and authorize my current International Student Advisor (or Designated School Official) to provide information as a part of my application to transfer to Campbell University.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

#### Section 2: TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISOR

The International student listed in Section 1 has applied for admission to Campbell University. We request confirmation of the student's status at your institution.

Current Immigration Status: F-1 \_\_\_\_\_ Other (please specify) \_\_\_\_\_

Is student in status?  Yes  No

If no, has a reinstatement application been filed?  Yes  No

Date of termination in SEVIS \_\_\_\_\_ Please enclose copies of documentation filed with USCIS.

Date of Graduation or last semester/quarter attended \_\_\_\_\_

I-94 expiration date: \_\_\_\_\_

#### Authorized Employment:

Has student participated in Curricular Practical Training?  Yes  No Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Has student participated in Optional Practical Training?  Yes  No Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Date of OPT \_\_\_\_\_ to \_\_\_\_\_

To the best of your knowledge, is the student eligible for transfer?  Yes  No. If no, please explain on a separate sheet attached.

SEVIS ID#: \_\_\_\_\_ SEVIS I-20 Transfer Release Date: \_\_\_\_\_

\_\_\_\_\_  
DSO Signature completing this form DSO Title Date

\_\_\_\_\_  
DSO Print Name Telephone Number Fax Number

\_\_\_\_\_  
Name of Institution Email Address

\_\_\_\_\_  
Address of Institution

PLEASE RETURN THIS FORM TO CAMPBELL UNIVERSITY INTERNATIONAL ADMISSIONS (see address above)