



International Student Transfer Verification Form

All international students transferring to Winthrop University from another educational institution within the USA must submit this completed form to the International Center of Winthrop University before we can create an I-20 in your name. The student must complete Section 1. The student must then ask the International Student Advisor at the current institution to complete Section 2. **Return this form to the International Center via fax (803/323-2340), scan and email or mail to the addresses listed at the bottom of this page.** As the student please remember the following:

- It is your responsibility to request that your current college/university release your SEVIS record to Winthrop University. You should verify that you have been fully admitted to Winthrop and are sure you will attend Winthrop prior to requesting a transfer of your SEVIS record. Once your SEVIS record is transferred, you must enroll at Winthrop University for the next available term to maintain your visa status. **Winthrop University's SEVIS school code is ATL214F01385000.**
- If you are currently on OPT, remember that transferring your SEVIS record to Winthrop or changing your program level from undergraduate to graduate at Winthrop will terminate your OPT. When you submit this form, you may request your current school to set your SEVIS transfer release date closer to the start date of classes at Winthrop. This will allow you to continue working with authorized OPT employment for as long as possible prior to beginning your studies at Winthrop.
- If your current SEVIS student record is terminated, Winthrop reserves the right to deny your terminated SEVIS record. Depending on the circumstances, Winthrop may require you to exit and re-enter the USA with a new initial attendance I-20 prior to beginning classes at Winthrop.

Section 1: Student's Information (Student to complete and sign)

Applicant's Name: _____
(Family or Last Name) (First Name) (Middle Name)

Address in Home Country: _____

Current U.S. Address: _____

Email Address: _____ Telephone Number: _____

"I authorize my current educational institution to release the information requested below to Winthrop University."

(Student's Signature) (Date)

Section 2: Previous Institution Information (Current Intl. Student Advisor to complete and sign)

1) Student's SEVIS Identification Number: N

2) What is the (intended) release date for the SEVIS record? _____ (please use mm/dd/yyyy)

3) To the best of your knowledge, is this student currently in legal immigration status and eligible to transfer?
 Yes No Please Explain: _____

4) Has this student engaged in any periods of OPT or CPT? Yes No
If yes, please provide dates and type of training authorized: _____

5) Does this student have F-2 dependents? Yes No Number of dependents: _____

Name of School Official (please print): _____ Date: _____

Signature of School Official: _____ Title of School Official: _____

School Official Phone: _____ Email: _____