



Please Type or Print

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This form should be used if you wish to transfer to Purdue University from another U.S. educational institution which is activated in SEVIS (Student & Exchange Visitor System).

To the International Student: Please complete Section A of this form, then have the international student adviser at your current school complete Section B.

To the International Student Advisor: The student named below has been admitted to Purdue University. Your assistance is appreciated in completing Section B below and returning this form by fax or mail to the address/fax number listed at the top of this page. **SEVIS release to: "Purdue University Purdue University"**

Part A: TO BE COMPLETED BY THE STUDENT

Family Name	Given Name	Middle Name
Date of Birth (MM/DD/YYYY)	Phone Number	
Email Address		
Semester/Year you will begin study at Purdue:		
Fall	Spring	Summer(May) Summer (June) Year:
I permit the information requested below to be forwarded to Purdue University:		
Signature	Date Signed (MM/DD/YYYY)	

Part B: TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISER

SEVIS Release Date (MM/DD/YYYY)	SEVIS ID
What is the student's non-immigrant status? F-1 J-1	
If J-1 Please provide the following information:	
Program Number	Program Sponsor
Length of time in U.S.	What category is marked in #4 on the DS-2019 form?
To the best of your knowledge, is this student in good standing based on CIS (formerly INS) regulations? Yes No	
If the student is not in good standing, has your office filed a reinstatement application? Yes No	
What semester/quarter did/will the student last complete study at your institution?	
If your institution is a PUBLIC SECONDARY SCHOOL (High School):	
Date student first enrolled at your institution (MM/DD/YYYY):	Date student last re-entered the U.S. from travel abroad (MM/DD/YYYY):
Please indicate any Practical or Academic Training dates granted to this student:	
Comments	

International Student Advisor Information

Name	Title
Institution Name and Location	
Email Address	Phone Number
Signature	Date Signed (MM/DD/YYYY)