



TRANSFER REPORT FOR F-1 STUDENTS

INSTRUCTION TO APPLICANT (PLEASE PRINT): Please complete the following information and then submit this form to the International Student Advisor at your current school.

Name: \_\_\_\_\_

Name of Current Institution: \_\_\_\_\_

Please release the requested information to the University of Redlands. Please circle the proper school code you wish to transfer to: University of Redlands – Main Campus: LOS214F00344000. Apple Valley Location: LOS214F00344008. Burbank Location: LOS214F00344001. Rancho Cucamonga Location: LOS214F00344002. Riverside Location: LOS214F00344003. San Diego Location: LOS214F00344004. South Coast Metro Location: LOS214F00344005. Temecula Location: LOS214F00344006. Torrance Location: LOS214F00344007.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

THIS SECTION IS TO BE COMPLETED BY YOUR CURRENT SCHOOL

The student named above has applied for admission to the University of Redlands. Before we issue a SEVIS I-20, we need the following information:

- 1. Is your institution a SEVIS institution? [ ] Yes [ ] No
2. Does the student have a SEVIS I-20? [ ] Yes Sevis No. \_\_\_\_\_ [ ] No
3. Is the above named student currently in F-1 status at your school? [ ] Yes [ ] No
4. What date did the student enter your institution? \_\_\_\_\_
5. Has the student maintained full-time status at your institution? [ ] Yes [ ] No
6. Has this student ever had OPT? [ ] Yes [ ] No
7. Has the student met all of her/his financial obligations? [ ] Yes [ ] No
8. What is the student last day of attendance at your school? \_\_\_\_\_
9. Are there any special circumstances regarding this student's status? [ ] Yes [ ] No
If yes, please explain on the back of this form.

The undersigned Designated School Official (DSO) completed this form for the above named student. Further, the DSO acknowledges this student intends to transfer to the University of Redlands and has been entered into SEVIS as a "transfer out".

The release date for the transfer is \_\_\_\_\_.

Institution: \_\_\_\_\_
Address: \_\_\_\_\_
Phone: \_\_\_\_\_

Print Name (DSO) Signature Date

We appreciate your time in answering these questions and returning the form to us. The completed form may be returned to the student to be returned to the University of Redlands or mailed or faxed:

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