



GRADUATE SCHOOL  
INTERNATIONAL GRADUATE STUDENT SERVICES

## SEVIS TRANSFER IN FORM

For International Graduate Students Transferring to Virginia Tech

International students transferring to Virginia Polytechnic Institute and State University – Graduate School (Virginia Tech) from another college or university in the U.S. must submit this form before a transfer I-20 or DS-2019 can be issued.

Please note the following:

1. A SEVIS record can be released to only ONE school/institution.
2. Your new I-20 or DS-2019 cannot be issued until AFTER the SEVIS record has been released to Virginia Tech.
3. All employment, including Optional Practical Training, must end on or before the release date of your SEVIS record to Virginia Tech.
4. If you will travel outside of the U.S. between when you finish at your current school and when you begin classes at Virginia Tech, you will need to have your new I-20 or DS-2019 to re-enter the US.

Upload this form in the [IntlHokies portal](#) as part of the **New Student I-20 or DS-2019 Request e-Form**.

**TO BE COMPLETED BY THE STUDENT:**

\_\_\_\_\_

Last/Family Name	Given Name	Middle (if applicable)	VT Student ID #
------------------	------------	------------------------	-----------------

I authorize my International Student Advisor to provide the following information and release my SEVIS record to Virginia Polytechnic Institute and State University--Graduate School.

\_\_\_\_\_

Signature of Applicant	Date
------------------------	------

**TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR:**

NOTE: Virginia Tech Graduate School Codes are - **WAS214F01228001** (F student)    **P-1-00071** (for J student Exchange Visitor)

SEVIS Number \_\_\_\_\_ Current non-immigrant classification     F-1     J-1

SEVIS Release Date \_\_\_/\_\_\_/\_\_\_    Date of graduation or last date of attendance \_\_\_\_\_

Has the student maintained legal immigration status?

- Yes
- No Please explain: \_\_\_\_\_

Name of U.S. Institution \_\_\_\_\_

Name & Title of School Official \_\_\_\_\_

Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Signature of School Official \_\_\_\_\_ Date \_\_\_\_\_