

SEVIS TRANSFER REQUEST

Office of Enrollment Management



STUDENT: You are required to obtain a SEVIS release prior to acceptance to Rogers State University. Please take this form to the International Office at the College/University you are currently attending to be completed.

Student Name: _____
(Last name/Family name) (First name) (Middle name)

Student Signature: _____ Date: _____

Semester you wish to enter RSU: _____

TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR:

Please fax this completed page to us as soon as possible:

The above student is seeking admission to Rogers State University. Immigration regulations require confirmation that he/she has been pursuing a full course of study at your institution.

Last semester enrolled at your institution: _____ Is student in valid F-1 status? yes no

If no, please explain: _____

In addition, we need the date you will transfer SEVIS to RSU. We only need the date to go ahead with the admissions process for this student. No SEVIS transfer is necessary until the date you choose.

Expected transfer release date in SEVIS: _____

I CERTIFY THAT THE PRECEDING INFORMATION IS CORRECT:

Name and Title of DSO

Signature

Name of Institution

Address of Institution

Office Phone Number

Date

PLEASE FAX TO: (918) 343-7550

Attn: International Coordinator

**Rogers State University
1701 W Will Rogers Blvd
Claremore, OK 74017
(918) 343-7548**