



International Student Services - Office of Admissions
One College Drive, Brunswick, GA 31520 * Phone: 912-279-5701 * Email: clesseig@ccga.edu

SEVIS RECORD TRANSFER-IN FORM

This form must be completed by individuals who are currently **in the U.S. under the F-1 status and who wish to transfer their SEVIS record to CCGA**. Please complete the top portion of this form and have your current or most recent International Student Adviser complete the bottom portion. This form must be returned before a student can receive a new I-20 form.

Part I. To be completed by student (Please print)

Family name First name Date of birth

Current U.S. address:

Street name and address Apt. #

City State Zip

Phone Number

Do you plan to travel outside the U.S. in the next 4 months? Yes No Dates: From to:

Term to begin at CCGA: Fall Spring Summer Year

Part II. To be completed by Designated School Official (DSO) at previous institution:

The above mentioned student has requested a transfer of his/her SEVIS record to RBHS. Before we can proceed with this request, the following information is required:

SEVIS ID number SEVIS release date:

Student's last date of attendance? I-20 expiration date

Level of study at your institution: High School Undergraduate Graduate Language Training

To the best of your knowledge, has the student maintained legal status in the U.S.? Yes No

If no, please explain:

Cite any periods of authorized employment CPT OPT Other Dates: from to:

DSO's printed name: _____ Title: _____

School name as it appears in SEVIS:

School address:

Signature: _____ Tel. # Date