

**F-1 SEVIS TRANSFER-IN FORM**

Student's Name: \_\_\_\_\_  
 (as appears on passport) \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_

UCLA ID #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

SEVIS ID #: N\_\_\_\_\_ Term Admitted to UCLA: \_\_\_\_\_

Degree Objective:  Bachelor's  Master's  Doctorate

**TO BE COMPLETED BY DESIGNATED SCHOOL OFFICIAL (DSO)**

School/Institution Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 Street Address \_\_\_\_\_ Building / Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_

When was the student's last enrollment at your institution? \_\_\_\_\_  
 Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Is the student currently engaging in Post-Completion OPT?  YES  NO

▪ If Yes, what is the student's EAD Card end date? \_\_\_\_\_  
 Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Has the student maintained valid F-1 status?  YES  NO

**SEVIS RELEASE DATE:**

(Date SEVIS record will be released to UCLA)

Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**Please release student's SEVIS Record to - University of California, Los Angeles (LOS214F00297.000)**

Name and Title of DSO: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Signature of DSO: \_\_\_\_\_ Date: \_\_\_\_\_

**Instruction for DSO:** *Return completed SEVIS Transfer-In Form to above-named student.*

**Instruction for Student:** *Upload completed form to your UCLA I-20 Request Portal.*