

# SEVIS Transfer Eligibility Form

STUDENT ID #: \_\_\_\_\_

This form is only to be filled in by a current F-1 student who is in the US and would like to transfer to Saint Paul College.

For Office Use Only

## Part 1: To be completed by the F-1 student

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address in the US: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

County of Citizenship: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

SEVIS ID: \_\_\_\_\_

I authorize my current Designated School Official (DSO) to provide the information on this form to Saint Paul College.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Part 2: To be completed by Designated School Official (DSO)

Please check one:

- Student has maintained status and is eligible for transfer. He/she was registered full-time the preceding term/semester: \_\_\_\_\_ term/semester AND \_\_\_\_\_ year
  - » Recommended SEVIS Release Date: \_\_\_\_\_
- Student did not register but physically reported. Transfer recommended.
  - » Recommended SEVIS Release Date: \_\_\_\_\_
- Student is out of status. If so, why? Please explain. If reinstatement is an option, please call or contact the Saint Paul College F-1 international student advisor.

Has the student met all financial obligations to your institution?  Yes  No

School Code: SPM214F55031000 DSO Name: \_\_\_\_\_

Name of institution: \_\_\_\_\_

Address of institution: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Give this form back to the student, or you may send to:  
Saint Paul College, F-1 International Student Program – One Stop  
235 Marshall Avenue • Saint Paul, MN 55102  
Email: [international@saintpaul.edu](mailto:international@saintpaul.edu)