



Incoming F-1 Transfer Form

To be completed by the student

Name (family name, given name)	City of Birth	TTU Student Number
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Previous School

TTU Expected Start Date? Spring Fall Summer 20_____

Graduate Student? or Undergraduate Student?

Student Signature: _____ Date: _____



To be completed by a DSO at current school

Student's SEVIS Number	SEVIS Transfer Date
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Has the student been authorized for CPT at their current academic level?	Yes	No
Has the student been authorized for OPT at their current academic level?	Yes	No
Has the student been authorized for a RCL at their current academic level?	Yes	No
Does the student have any F-2 dependents?	Yes	No
Is the student's SEVIS record currently in ACTIVE status?	Yes	No

I confirm that, to the best of my knowledge, the student named above is eligible for a SEVIS Transfer.

PDSO/DSO Signature: _____

Name: _____

School: _____

Date: _____

Please return form to: Office of International Affairs, Texas Tech University, Box 45004, Lubbock, TX 79409; or fax to 806-742-1286. Texas Tech University SEVIS School Code: DAL214F00020000