

# Transfer Verification Form

**UIC** Office of International Services

For Students Transferring to UIC

**Instructions:** This form should be completed by F-1 or J-1 students wanting to transfer to UIC from another U.S. institution and the current international student advisor at the student's current institution. It should then be submitted to the Office of International Services at UIC. The transfer process will not be finalized until this form is received.

## TO BE COMPLETED BY THE STUDENT

Name: \_\_\_\_\_  
Last First Middle  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ UIN at UIC: \_\_\_\_\_  
mm dd yyyy

I hereby grant permission for the information requested below to be forwarded to the Office of International Services at the University of Illinois at Chicago. I certify that the information on this form is true and correct.

\_\_\_\_\_  
Student Signature Date

## TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR

Please complete the bottom portion of this form for the F-1 or J-1 student listed above and submit to the Office of International Services at the University of Illinois at Chicago (address and fax number are listed below).

**School Code for the University of Illinois at Chicago: F-1: CHI214F01091000 J-1: Please contact OIS**

SEVIS #: \_\_\_\_\_ SEVIS release date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

To the best of your knowledge, is the student in valid immigration status?  Yes  No

Current program/level: \_\_\_\_\_ Date of last attendance at your institution: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

Any authorized Reduced Course Load:  Academic  Last Semester  Medical: \_\_\_\_\_  
number of months

Please indicate any dates of authorized Practical Training (CPT/OPT): \_\_\_\_\_

## STUDENT ADVISOR INFORMATION

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Institution: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_

I certify that the information provided above is true and correct.

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

Office of International Services  
1200 West Harrison Street  
Chicago, IL 60607-7164

University of Illinois at Chicago  
Phone (312) 996-3121  
Fax (312) 996-9432

www.ois.uic.edu  
ois@uic.edu  
Revised 4/2014