



INTERNATIONAL ACADEMIC TRANSFER-OUT FORM

F-1 STUDENT TRANSFER- OUT FORM

Please complete the information in **Section I** and submit this form to your **New School** International Student Rep.

Section I: *(To be completed by student)*

Student's Name: _____
(Print) (Family Name) (First Name) (Middle Name)

Address of Home Country:

Current US Address:

E-mail Address: _____ Telephone: _____

Student Status: F-1

Social Security Number: _____ Date of Birth: _____

Semester/year intended to transfer:
Fall _____ Spring _____ Summer _____

Please check here if you have any dependents: _____ How many? _____

**Family Educational Rights and Privacy Act: Permission to release information from Gulf Coast State College. "I hereby authorize my present International Student Advisor at Gulf Coast State College to release such information to the transfer school."

Requested release date: _____. This is the date you want your current International Advisor to



release your records from GCSC to the new school. The release will terminate the student's ability to be employed on-campus at your current school.

(Student signature) _____
(Date)

Section II: *(To be completed by Transfer School)*

Student SEVIS ID#: _____ GCSC College SEVIS ID#: MIA 214F0018700

Name of Transfer School: (No abbreviations please)

Transfer School's SEVIS ID#: _____

Transfer release date of SEVIS records: _____

PDSO OR DSO's signature: _____

Phone #: _____

This international student is interested in transferring to your school. Please retain a copy for your records and fax completed copy to Gulf Coast State College. This will assure proper handling of the student's records.

Please call if I can be of further assistance.

Sincerely,

Alice Walls
Coordinator of Enrollment Services
Phone: 850-913-3282
Fax: 850-913-3308
SEVIS ID # MIA214F0018700.

