

Michigan State University TRANSFER OUT Form

Last Name:		
First Name:		
PID: A		SEVIS ID: N
I am a:	<input type="checkbox"/> F-1 Student	<input type="checkbox"/> J-1 Student <input type="checkbox"/> J-1 Visiting Scholar

With this form I indicate that I have been **accepted** by and am transferring to:

Full Name of School:	
City:	State:

My transfer out date will be: (for students usually the last day of your last semester at MSU. However, if you are transferring after spring semester and plan on working through the summer at MSU, then you will need to give a later transfer out date.)

Month:	Day:	Year:
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Student / Visiting Scholar Signature

Date: _____

F-1 or J-1 Students ONLY

Name of Academic Advisor:	
Department:	
Signature:	Date:

J-1 Visiting Scholars ONLY

Name of MSU Employer/Faculty contact:	
Department:	
Signature:	Date:

PLEASE NOTE: MSU will have access to your SEVIS record until the transfer out date expressed above. Once the transfer out date has passed, only the school to which you are transferring will have access to your record. If you change your mind about transferring out of MSU and the transfer out date has passed, you must contact the above listed school. Students should note that some schools have policies that oblige the student to attend their school for at least a semester before transferring out to another school.

For office use

Verify, sign, give student a copy, transfer in SEVIS, and keep a copy in the file.	
OISS Signature:	Date: