Concordia University Irvine International Student F-1 Transfer Form



International Admissions Office 1530 Concordia West Irvine, CA 92612-3203 www.cui.edu InternationalAdmissions@cui.edu 949-214-3473

PART 1: To	be complete	d by the tra	ansferring	student:

Student Name: Date of Birth(MM/DD/YY):_____ Country of Citizenship: _____ _____ Initial Term at CUI: Program of Interest at CUI: I intend to transfer to Concordia University Irvine. I grant permission for the information requested below to be forwarded to Concordia University Irvine. (SEVIS SCHOOL CODE: LOS214F00971000) Student Signature: _____ Date: _____ PART 2: To be completed by International Student Advisor: The above named student intends to transfer to Concordia University Irvine. Please complete this form and return to the address below and email or fax it to the number indicated at the bottom of this form. Thank you. SEVIS ID: SEVIS Transfer Release Date:_____ Expected date of completion / graduation: Date of attendance: Level of Study at your institution: Language Undergraduate Graduate □ Other (Specify): Has the student met all financial obligations to your institution? Yes Has this student maintained F-1 status? (If no, please explain) Yes Is reinstatement needed? (If Yes, please explain) Yes Is this student eligible to transfer? (if no. please explain) Yes □ No Other Comments: Name of Institution: State Tel: ______ Email: _____ DSO's Full Name: _____ DSO Signature: _____ Date: _____

Please complete this portion of the form and submit it to the International Student Advisor/DSO at your current school.

Please fax or email to: (949) 214-3473 or InternationalAdmissions@cui.edu

