International Student Transfer Form to King's College (SEVIS School Code: PHI214F00471000)

Complete this form ***only*** if:

1. You are transferring from another institution in the U.S.
2. You have received an admission letter from King's College ***and***
3. You want a Form I-20 from King's College

Complete Part I and submit to your current international student advisor. You must discuss your transfer-out date with your current advisor. ***Your advisor will complete Part II***. Have your current international office scan and email this form directly to King's College (information listed at bottom of page). **NOTE:** You must also submit additional documentation to qualify for your I-20.

Part I: To be completed by the student

Student Name: _____ _____ _____
(Family/surname as it appears in passport) (First/Given) (Middle)

Current U.S. address _____
(Street address, city, state, zip code)

Birth date (mm/dd/yyyy) _____ City and country of birth _____

Country of citizenship _____ Country of permanent residence _____

Semester you expect to begin at King's College: ☐ Fall ☐ Spring ☐ Summer Year: 20_____

Name of the program you will be entering into:_____

Will you leave the U.S. before enrolling at King's College? Yes No
If yes, will you need to go to the U.S. Embassy to apply for a new visa? Yes No (Usually necessary only if your current F-1visa has expired or if you are changing status from another visa type to F-1).
If changing your status, what is your current visa type? _____

I agree that my SEVIS record will be transferred to King's College and that the information above is correct:

Student Signature: _____ Today's date: _____

Part II: To be completed by International Student Advisor at current school

Please confirm that you have seen proof of this student's admission to King's College before initiating SEVIS

On what date will the SEVIS transfer occur? _____ Student's SEVIS ID: _____

Name of DSO completing form: _____ Current Institution: _____

DSO's phone/contact information: _____ Is this student currently in status at your institution? _____

Student's time of enrollment at your institution: _____ to _____

Are there any other circumstances of which we should be aware? _____ If so, please elaborate: _____

_____

DSO Signature: _____ Date: _____

Return this form to:

Gina M. Petrucelli, Office of International Student Recruitment
133 North River Street
Wilkes-Barre, Pennsylvania, 18711
internationalservices@kings.edu
Phone: (570) 208-5864 Fax: (570) 208-8027