



TRANSFER INFORMATION FORM VERIFICATION OF ATTENDANCE FOR F-1/J-1 STUDENTS

If you are currently attending, or have attended, a school in the United States on an F-1/J-1 status, please complete this section and submit it to your current International Student Advisor.

Part 1: This section to be completed by applicant:

I, _____, plan to attend NJIT beginning the _____ semester.
First Name Last (Family) Name

SEVIS ID# _____
School ID or Social Security Number _____
OPT dates (if any) _____ to _____
Transfer Release Date (obtained from the International Student Advisor at your current school) _____

Current U. S. Address Foreign Address in Home Country

Current Telephone Number _____ E-mail _____

I authorize my current school to release information related to my non-immigrant status and to release me to NJIT on the above Transfer Release Date.

Signature _____ Date _____

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Part 2: This section to be completed by your current International Student Advisor:

The above-mentioned student has been admitted to NJIT. BCIS regulations require confirmation that he/she has been maintaining valid non-immigrant status at your institution before transfer to NJIT can be approved. Please complete the following and return this letter to:

Office of University Admissions
New Jersey Institute of Technology
323 Dr. ML King Blvd.
Newark, NJ 07102

- _____ The student is in valid F-1/J-1 status and is eligible for a transfer notification.
- _____ The student is out of status:
 - _____ A reinstatement to student status is pending. (Copies of documents filed with the BCIS/U.S. DoS)
 - _____ The student is out of status, and has been advised that a reinstatement will be required upon issuance of a new I-20/DS-2019 from NJIT
- _____ Other: _____

Please list dates of all previously authorized periods of employment (for F-1 only):
Curricular Practical Training _____ Optional Practical Training _____

Academic Training (for J-1 only): _____

Name and title of "Designated School Official"/"Responsible Officer"/
"Alternate Responsible Officer" completing this form

Signature

Date

Name of Institution

E-mail Address