

TRANSFER TO UWG REQUEST

This form should be used if applicant is transferring from an institution in the United States.

SECTION 1: PROSPECTIVE STUDENT INFORMATION

To be completed by the student.

Applicant's Family Name (Last Name)			
Applicant's Given Name (First Name)			
Date of Birth		UWG Student ID	917
Phone Number		Term to start at UWG	
Email Address			
Current Visa Status	F-1 Student	J-1 Student	Other Visa Type: Specify _____
Current Institution			

I give my permission for my present institution to provide the information requested on this form to the University of West Georgia.

Student Signature: _____ Date: _____

SECTION 2: ADVISOR RECOMMENDATION

To be completed by the PDSO/DSO (F-1 Advisor) or ARO/RO (J-1 Advisor) of the students most recent (or current) institution.

If you can confirm this transfer, please complete the form and process the "transfer out" in SEVIS. Any questions can be directed to International Student Admissions & Programs at the University of West Georgia. Thank you for your timely assistance. Please do not transfer the SEVIS file until the student receives their acceptance letter from UWG.

Student's Status	<input type="checkbox"/> Student above is in good standing with SEVIS (Active Status) <input type="checkbox"/> Student above is out of status. Please explain: _____		
SEVIS ID Number	N000	Date/Term of Last Enrollment	
Is student on work authorization?	<input type="checkbox"/> OPT <input type="checkbox"/> CPT <input type="checkbox"/> No work authorization	For students on work authorization Work Authorization Dates	Begin Date: End Date:
SEVIS Release Date		Institution	

DSO/ARO Name: _____

DSO/ARO Title: _____

DSO/ARO Signature: _____ Date: _____

Email completed forms to global@westga.edu