



# MONTANA STATE UNIVERSITY

Office of International Programs, 183 Strand Union Building, Bozeman MT 59717-2260  
Phone: (406) 994-4031

## SEVIS Transfer In Form

**NOTE:** Students currently in F-1 status studying in the U.S. who plan to transfer to Montana State University must complete the transfer procedure through SEVIS. This form must be completed and returned to an advisor in International Student and Scholar Services (ISSS).

Before you fill out the form, please make sure you have received admission to Montana State University. You must also notify your current institution of your intent to transfer. Once you have notified your institution you may fill out section 1 of this form. Upon completion, your Current International Student Advisor must fill out section 2. Once the form is completed and your SEVIS record release date is determined you can email this form to Montana State University at [globalstudy@montana.edu](mailto:globalstudy@montana.edu).

### **SECTION 1: Student Information** (To be completed by student)

**Please complete the following information:**

Name \_\_\_\_\_  
(Surname, First name and Middle name)

Email Address \_\_\_\_\_

Student SEVIS Identification Number \_\_\_\_\_  
(This is the "N" number in the upper right-hand corner of your I-20)

Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ MSU Student ID Number \_\_\_\_\_

Current U.S. Address \_\_\_\_\_  
\_\_\_\_\_

Admission Type  BA/BS  MA/MS  PHD Program \_\_\_\_\_

### **Read and Sign**

By signing below, I give permission to the U.S. institution listed in Section 2 to release all necessary information to complete my transfer to Montana State University.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_



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## SECTION 2: Current Institution Information (To be completed by current DSO)

NOTE: Please release record to Montana State University – F-1: Bozeman (HEL214F00560000) J-1:  
Program Number P-1-00286

**\*DO NOT TRANSFER STUDENTS IN TERMINATION STATUS\***

SEVIS Release Date \_\_\_\_\_ Level of Education \_\_\_\_\_

Dates of Enrollment \_\_\_\_\_ Date of Graduation \_\_\_\_\_

Has student acted in accordance with USCIS regulations? Yes No

Has student met financial obligations? Yes No

Has student been authorized for off-campus employment? Yes No

Has student been approved for reduced course load? Yes No

U.S. Institution \_\_\_\_\_ Name, Title of DSO \_\_\_\_\_

Email \_\_\_\_\_ Phone Number \_\_\_\_\_

DSO/ARO Signature \_\_\_\_\_ Date \_\_\_\_\_