



Global Engagement Office
 International Students & Scholars
 Email: ISS@scu.edu
 Phone: (408) 551-3019

Request to Transfer SEVIS Record to Santa Clara University

To request that your F-1 SEVIS immigration record be transferred to Santa Clara University, please complete Section A and submit this form to your school's International Student Advisor to complete Section B. The International Student Advisor will email the completed form directly to Santa Clara University.

Please review our [SEVIS Record Transfer FAQ](#) for more information.

Section A: To Be Completed By Student

Last Name (Family Name) _____
 First Name (Given Name) _____
 SCU Student ID _____ SEVIS Number _____

SCU Program:

- Undergraduate Student
- Graduate School of Business
- Education & Counseling Psychology
- Graduate School of Engineering
- School of Law
- Jesuit School of Theology

Campus of Acceptance:

- Santa Clara University in Santa Clara, CA (SFR214F00607000)
- Jesuit School of Theology of SCU in Berkeley, CA (SFR214F00607001)

Please select all that apply:

- I am currently outside the U.S.
- I am currently in the U.S. and my most recent date of arrival was _____
- I have plans to leave the U.S. and my travel dates are _____ to _____
- I have a current F-1 Visa stamp in my passport that expires on _____
- I am currently working on OPT STEM OPT. My EAD card expires on _____

I authorize my present International Student Advisor (or equivalent campus officer) to provide the information below. Student Signature _____ Date _____

Section B: To Be Completed By International Student Advisor of School Last Attended

1. SEVIS record status: Initial Active (SCU does not accept transfer of Terminated SEVIS records)
2. This student is in status and eligible to transfer according to 8 CFR 214.2(f)(8)(i): Yes No
 Comments (optional) _____
3. Dates of attendance at your institution: Start Date _____ End Date _____
4. Are there any dependents on the student's SEVIS record? Yes No If yes, how many: ____

SEVIS ID # _____ SEVIS Release Date: _____

Signature of School Official _____ Date _____
 Name and Title of Official _____
 Email _____ Phone number _____
 Name & Address of Institution _____

Please submit this completed form to Santa Clara University via email iss@scu.edu