GEORGE SCHOOL
SEVIS TRANSFER RELEASE FORM

If you are currently in the United States on an F-1 visa, please complete Section 1 of this form and submit it to your current International Student Advisor to complete Section 2. The form should then be returned to our office either by mail or email at the addresses below. You may also fax the form to us at +1. 215.579.6549. Your signature will authorize your advisor to provide the information requested. We cannot process your I-20 until we have received this form.

Mail or email to:  Colby Langweiler, George School, PO Box 4460, Newtown, PA 18940 clangweiler@georgeschool.org

SECTION 1: To be completed by the student:
Name: __________________________________________________________
Email: ___________________________________ Phone Number: ____________________________

By signing this form, I authorize the release of the information requested below:
Student’s Signature: __________________________ Date: __________________________

SECTION 2: To be completed by the International Student Advisor at the current school.
SEVIS ID Number: __________________________ Transfer Release Date: ________________
Student has enrolled full-time at your institution during the _________________ semester/term.
Has the student been maintaining legal F-1 Status at your institution?  ☐ Yes  ☐ No
If no, please explain ______________________________________________________________
Student completed or terminated studies at your institution on __________________________
Please specify terminated reason if applicable __________________________________________
To the best of your knowledge, is the student eligible for transfer according to DHS regulations?
☐ Yes  ☐ No
If no, please explain ______________________________________________________________

Name/Title of School Official: ______________________________________________________
Name of Institution: _________________________________________________________________
Signature: ___________________________ Email address: ________________________________
Date: ________________________________