



F-1 Student Transfer Form

International Student Services Office

Instructions

The student should complete Section 1 and then give the form to their International Student Advisor (the PDSO or DSO at your current school). Ask your International Student Advisor to complete Section 2 and return the form to St. Bonaventure University as soon as possible.

Section 1 – Student Information

Family / Last / Surname	First / Given Name	Middle Name
SBU Student ID	Semester & Year Entering SBU	Requested Transfer Release Date

I authorize my current International Student Advisor (PDSO or DSO) to provide the information below as part of my admission to St. Bonaventure University and to release my electronic SEVIS record.

Student signature	Date
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Section 2 – International Student Advisor (PDSO or DSO)

St. Bonaventure University's School Code is BUF214F00246000

School Name	Student's Degree level	Date of Last Attendance
Is the student currently in-status? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, date of termination in SEVIS: _____		
If no, date of reinstatement application: _____		
Did the student graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Was the student authorized for a Reduced Course Load? If yes, please specify below. <input type="checkbox"/> Yes <input type="checkbox"/> No		
Authorization Dates: _____		
Authorization Reason: _____		
Was the student authorization for Practical Training? If yes, please specify below. <input type="checkbox"/> Yes <input type="checkbox"/> No		
1. CPT Authorization Dates _____ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		
2. OPT Authorization Dates _____		
PDSO/DSO Name & Title	Email	
PDSO/DSO Signature	Date	

Please send the completed form to the International Student Services Office at St. Bonaventure University
Email isso@sbu.edu | Fax: 716-375-2072 | Mail: 3261 W State Rd. Box 2479, St. Bonaventure, NY 14778