SEVIS Transfer to ULM
School Code: NOL214F00117000

Part I: To be completed by student

Surname:_____   Given Name:_____
<center>(Please write your name exactly as it appears on your passport.)</center>

Date of Birth (mm/dd/yyyy):_____   Email_____

Current U.S. Address:_____
<center>Street Number and Name   City/State/Zip Code</center>

Please release the following information to the University of Louisiana Monroe, Office of International Student Services

Student Signature:_____   Date:_____

Part II: To be completed by PDSO/DSO

This student has been accepted for admission and wishes to transfer to the University of Louisiana Monroe for the next school term. Please provide the following information and email the competed form to international@ulm.edu or send by postal mail to The University of Louisiana Monroe, Office of International Student Service, 700 University Ave, Sandel Hall 200, Monroe, LA 71209

School Name:_____   School SEVIS Code:_____

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Is this student eligible to re-enroll at your school? ‰ YES ‰ NO   SEVIS Release Date:_____

Dates of Full-time Attendance (mm/yyyy to mm/yyyy):_____ to _____

Is this student currently in OPT or CPT? ‰ YES ‰ NO / (^ z, provide approval dates:_____

Name of PDSO/DSO completing this form:_____
<center>(Please print name)</center>

Phone Number_____   Email_____

PDSO/DSO Signature_____   Date:_____