

## **Transfer-in Verification Form for F-1 students**

This form is required for all international students admitted to a full-time program at Northeastern University and who are currently enrolled or are in a period of post-completion Optional Practical Training at another U.S. school.

Important: Your I-20 from Northeastern cannot be issued until this form is complete **AND** the SEVIS record release date listed below has passed.

Part I: to be completed by the student requesting a transfer of his/her SEVIS record to Northeastern			
Student's Name:		DOB:	/ /
Student's Name:(Given Name)	(Family Name)		(mm/dd/yyyy)
SEVIS ID:	E-mail Address:		
Admitted to Northeastern University at:    Boston Campus    Seattle Campus  Charlotte Campus   Silicon Valley Campus			
Start date of the program that you intend to enroll at Northeastern University:/			
By signing this form, I authorize to complete Part II of this form and release my SEVIS record to Northeastern University. (Please note: your OPT employment authorization ends on the date your SEVIS record is released).			
Student's signature		Date:	
Part II: to be completed by an International Student Advisor (P/DSO) at the current school.			
Name of your Institution:			
What was the date/will be the last date o	f enrollment at your school?		☐ Never attended
Has the student been authorized for post	completion OPT?	□ No	
If yes, list any periods of OPT:			<del></del>
To the best of your knowledge, is the stud	dent in status and eligible to transfer	to Northeastern?	☐ Yes ☐ No
If no, please explain:			
SEVIS record Release Date* (please speci *Please do NOT complete or terminate th			
Northeastern School code: Boston Camp Charlotte Campu	ous - BOS 214F00257000 / Seattle Car us - BOS 214F00257001/ Silicon Valle	•	
P/DSO Name and Title:			
Signature of P/DSO :	Contact info:		

Once this form is complete, please return it to the student. The student will need to submit this form along with other documents to Northeastern.