



UNIVERSITY OF NORTH AMERICA

Transfer Recommendation Form

12750 Fair Lakes Cir,
Fairfax, VA 22033
Phone: 571-633-9651
Fax: 703-890-3372
www.uona.edu

This form must be completed by individuals who are currently **in the United States under F-1 status** and who have been accepted to study at UoNA. Please complete the top portion of this form and have the Designated School Officer (DSO) at your current school complete the bottom portion. Present this form to the DSO with **a copy of your acceptance letter** from UoNA. This form must be returned to UoNA before the student can receive his/her new Form I-20.

Part I. To be completed by student (Please print clearly)

Family name:

First name:

Term to begin at UoNA:

Fall

Winter

Spring

Summer

Year

I-94 Admission number:

Date of birth:

Permanent foreign address:

Street name and address:

Province:

City:

Postal Code:

Country:

Current U.S. address:

Street name and address:

City:

State:

Zip Code:

Do you plan to travel outside

The U.S. in the next 4 months?: Yes

No

Travel dates

From:

To:

Part II. To be completed by Designated School Official (DSO) at current institution:

The above mentioned student has requested a transfer of his/her SEVIS record to UoNA. Before we can proceed with this request, the following information is required.

SEVIS ID number:

SEVIS Release Date:

Student's last date of attendance:

I-20 expiration date:

Level of study at your institution:

Undergraduate

Graduate

Language Training

To the best of your knowledge, has the student maintained legal status in the U.S.?:

Yes

No

If no, please explain:

Transfer-Out School Name:

SEVIS Code:

DSO's printed name:

Telephone #:

Transfer-in School Information:

Name of Institution in SEVIS: University of North America

SEVIS Code: WAS214F01367000

Address: 4375 Fair Lakes Court
Fairfax, VA 22033

Fax: 703-229-8265

DSO Contact Information:

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