![ASU] Arizona State University

SEVIS Transfer Form

To the international student: Please complete section 1 and submit this form together with a copy of your Arizona State University letter of admission to the international student advisor at your current or last U.S. institution.

To the DSO/international student advisor: The student who filled out section 1 is requesting that his/her SEVIS record be transferred to Arizona State University. Please fill out section 2 and transfer the record to school code **PHO214F00127000**, regardless of the campus mentioned in the admit letter.

Transfer deadlines:
- **For Spring 2019**, the SEVIS Transfer deadline is **Dec. 15, 2018.**
- **For Summer 2019**, the SEVIS Transfer deadline is **May 6, 2019.**
- **For Fall 2019**, the SEVIS Transfer deadline is **Aug. 5, 2019.**

Section 1 (to be completed by the student)

Last name: Chen	Given names: Chuan-Hung
Current institution ID:	ASU ID #: (10 digits) 1215 111 716

I will start the following program at Arizona State University: ☑ Bachelor's ☐ Master's ☐ Doctoral

U.S. address (do not enter a P.O. Box address)
Street and apt. #:

City	State/Province	Zip code

SEVIS/Home country address (This is your home country address, not your U.S. address – do not enter a P.O. Box address.)
Address line 1 Room 701, Unit. 9, Lane 3200, Hong Mei Road, Minhang District, Shanghai, China
Address line 2

City Shanghai	State/Province	Postal code/Zip/Pin 201103	Country China

I hereby request the Designated School Office (DSO) to release my record and provide my information to Arizona State University, school code:

PHO214F00127000

I understand I must be enrolled full time no later than the late registration and add/drop deadline published in the ASU academic calendar, and that I must complete the new student check-in with the International Students and Scholars Center before the first day of classes.

Chen, Chuan Hung _____ 2019.12.11
Student's signature   Date

Section 2 (to be completed by the international student advisor or DSO)

SEVIS release date (MM/DD/YYYY): _____   SEVIS ID number: _____
(Current program or OPT end date – an actual date is needed. Please do not write "at end of program.")

Please choose one of the following:
☐ This student is in good standing and is/was enrolled in a full course of study. Last day of attendance/OPT: _____
☐ This student is out of status and will not be transferred.

Comments: _____

DSO information
Name (please print): _____   email: _____

Institution name: _____   Phone: _____

Institution address: _____

_____   _____
DSO signature   Date

Please contact us at **admission.asu.edu/findmyrep** if you have any questions.
Please upload this form on **My ASU** under **Priority Tasks** at **my.asu.edu**.

9/10/2018