

If you wish to transfer from another Exchange Visitor Program sponsor to Washington State University, please have the Responsible Officer of your current Exchange Visitor Program provide the new program information in Section I and **return this form to Global Services by fax at (509) 335-2373 or email at ip.globalservices@wsu.edu. If the transfer can be approved as requested, your student record will be transferred in SEVIS to your new Exchange Visitor Program on the date provided in Section II.**

Section I: New Program Information to be Completed by New Exchange Visitor Sponsor:

Name of Exchange Visitor: Last Name: _____ First Name: _____	
Exchange Visitor Category & Level:	Exchange Visitor Program Number:
Subject/Field Code:	Subject/Field Description:
Proposed dates of program at WSU: From: _____ To: _____	Date of Birth:
J-Program Number:	List all Periods of Academic Training:
SEVIS number:	Any additional comments:

Section II: Statement of Responsible Officer to Transfer Program Sponsorship
To be filled out by RO or ARO of the Current Exchange Visitor Program if transfer is approved.

SEVIS Transfer Release Date _ / _ / _	Transfer to this exchange program number _____ sponsored by <i>New Sponsor Program No.</i> _____ to Washington State University is necessary or highly desirable <i>Program Sponsor Name</i> and in conformity with the objectives of the Mutual Educational and Cultural Exchange Act of 1961.	
RO/ARO Name:	Signature: _____	Date: _____
RO/ARO: Name Printed		
RO/ARO Phone: _____	RO/ARO Email: _____	

For Global Services Office Use Only
SEVIS Transfer-In date: _ / _ / _ by _____

