

GEORGETOWN UNIVERSITY
J-1 STUDENT TRANSFER-IN REPORT

To legally transfer your immigration status to Georgetown University, please notify the International Student Advisor (RO, ARO) at your previous institution of your intent to transfer and request that the ARO/RO complete this form. Please return this form by fax to the attention of Ms. Giovanna Ubillus at (202) 687-5944 or by mail to the Office of International Programs (OIP), Attn: Giovanna Ubillus, International Student and Scholar Services, Box 571013, 2nd Floor Poulton Hall, Georgetown University, Washington, D.C. 20057-1013.

- A. **For graduating students or students on post-completion Academic Training:** you must transfer your immigration status prior to the end date on your DS-2019 Form.
- B. **For mid-program transfer students:** You should transfer to Georgetown University at the end of the current session at your current institution or prior to the last day of the add/drop period for the next required semester at your current institution.
- C. After the transfer release date has been reached, your previous institution may no longer access your student record in SEVIS.

SECTION I: TO BE COMPLETED BY STUDENT

Student Name: _____
(Family) (First/Given) (Middle)

Email Address: _____ Telephone: _____

I plan to travel outside the United States before beginning my course of study at Georgetown and will need a Georgetown-issued DS-2019 Form to re-enter the United States: Y N

If yes, I plan to leave the United States on (date) _____ and intend to return to the United States on (date) _____

My current J-1 visa stamp expires on (date): _____

SECTION II: TO BE COMPLETED BY THE SCHOOL'S RESPONSIBLE OFFICER

An (ARO or RO) is the person at a school who is authorized to issue the DS-2019 Form.

Name of Alternate Responsible Officer: _____

Position or Title: _____

Institution: _____

Telephone: _____ Fax: _____

Email: _____

Today's Date: ____/____/____

SECTION III: SEVIS TRANSFER INFORMATION

Student's SEVIS ID Number: _____

Please indicate transfer release date entered in SEVIS for the student: _____

*The SEVIS transfer school drop down lists Georgetown as:
Georgetown University-Main Campus: **Exchange Visitor Program Number P-1-01850***

1) The applicant named above (please check one of the items below):

___ Is taking a full course of study at this school and is expected to complete his/ her course of study on: _____

___ Completed the course of study at this school on: _____

___ **Did not** complete the course of study, but terminated attendance on: _____

2) Please list beginning and ending dates of enrollment at your institution:

From _____ to _____

3) Please list the number of months of previously authorized Academic Training: _____ months

4) While enrolled at your institution the student named above (please check one of the items below):

___ Acted in accordance with Department of State regulations.

___ Did not act in accordance with Department of State regulations. Please explain the violation and suggest whether you think the student is eligible for reinstatement.

5) According to your records, the above named student is eligible for transfer under the J-1 school transfer procedures outlined in 22 CFR 62.76: Y N

6) Use the space below for any additional comments you feel would be of interest regarding this transfer:

Thank you for your assistance.