



University at Buffalo
The State University of New York

Eligibility Confirmation Form for School Transfer by an F-1 Student

This form is required of all international students currently in the U.S. in F-1 status, regardless of whether or not the student intends to travel outside of the U.S. Before beginning studies at the English Language Institute (ELI), University at Buffalo, the student needs to complete this form and give it to a Designated School Officer (International Student Advisor) to complete, sign and return to the ELI. After we receive this form, we will issue your Form I-20.

Please follow the instructions below:

1. Section 1 is to be completed by the student.
2. Section 2 is to be completed by a Designated School Official (DSO) at your current school. The DSO will also:
 - a. Enter into SEVIS your intent to transfer to the University at Buffalo (UB is listed as "State University of New York at Buffalo – State University of New York at Buffalo" (BUF214F00010000) in the SEVIS Transfer School list), and
 - b. Enter into SEVIS a "transfer release date" on which your electronic record will become accessible to the University at Buffalo.
3. Return the completed School Transfer Form to the University at Buffalo. Please include copies of all immigration-related documents listed below:
 - a. Copy of the biographic page from your passport
 - b. Copies of ALL previous I-20s issued by other schools
4. Report to the English Language Institute at the University at Buffalo upon your arrival. Bring copies of your passport and all immigration documents with you at that time.

If you or your school's Designated School Official (DSO) has any questions about the transfer process, please telephone the English Language Institute at (716) 645-2077 and ask for Kathy Curtis



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SECTION 1 - TO BE COMPLETED BY STUDENT

I authorize a DSO at my current school to complete Section 2 of this form and send it to the English Language Institute at the University at Buffalo.

Name (please print): _____	
Family Name	Given Names
Date of Birth (MM/DD/YYYY): _____	
Name of Current School: _____	
Student Signature: _____	Date: _____

SECTION 2 - TO BE COMPLETED BY DESIGNATED SCHOOL OFFICIAL (DSO)

Please check the appropriate boxes below, provide the information requested, and return this form to UB via mail or fax.

<input type="checkbox"/> The student named above: (1) has been enrolled in a full-time course of study, (2) is considered to be maintaining lawful F-1 status, and (3) is eligible to transfer.
<input type="checkbox"/> This student is not eligible to transfer because s/he is out-of-status and has been advised to apply for reinstatement.
<input type="checkbox"/> This student would be eligible to continue studies at the current school.
<input type="checkbox"/> This student would not be eligible to continue studies at the current school because:
<input type="checkbox"/> Our school is not authorized to enroll international students in SEVIS.
<ul style="list-style-type: none"> • This student's SEVIS Identification Number is: _____ • This student's Transfer Release Date in SEVIS is: _____ <p align="center">Please release the student to: "State University of New York at Buffalo – State University of New York at Buffalo" (BUF214F00010000).</p>
DSO Signature: _____ E-Mail Address: _____
DSO Name (Please print): _____ Date: _____
Phone Number: _____ Fax Number: _____

Fax or Mail this page to:

University at Buffalo, English Language Institute, 320 Baldy Hall, Buffalo, NY 14260
Fax: (716) 645-6198 / Telephone: (716) 645-2077