

## SEVIS Information (Transfer In) Form

This form is required for transfer students applying to PCC who have an F-1 student visa and have an active SEVIS record.

**INSTRUCTIONS:** Please complete PART I and then give this form to an International Student Advisor/DSO at your current school.  
 The completed form can be emailed to our office: [international@pcc.edu](mailto:international@pcc.edu).

### PART I: To Be Completed By Student

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ G#: \_\_\_\_\_

DATE OF BIRTH: MM / DD / YYYY PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

I authorize a school official at my current school to provide Portland Community College with the information requested below.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### PART II - To Be Completed By International Student Advisor/ Designated School Official

**NOTE: This form is required as part of the application process to verify student's F-1 immigration status. This form is only for information purposes. We are not requesting that the SEVIS record be transferred at this time.**

SEVIS #: \_\_\_\_\_ DATES OF ATTENDANCE: MM / DD / YYYY - MM / DD / YYYY

Is the student's SEVIS record currently active?  Yes  No

Is student in status with respect to F-1 immigration regulations?  Yes  No

If NO, please explain the circumstances: \_\_\_\_\_

Has this student been approved for Reduced Course Load in the past?  Yes  No

If YES, please list approval reasons:

Academic (Term/Dates): MM / DD / YYYY

Medical (Term/Dates): MM / DD / YYYY

Other \_\_\_\_\_

Has this student encountered issues with any of the following?

Academic Progress:  Yes  No

Maintaining F-1 Status:  Yes  No

Student Conduct:  Yes  No

Other:  Yes  No

If YES, please indicate: \_\_\_\_\_

Last authorized vacation term: MM / DD / YYYY - MM / DD / YYYY

Has this student ever been granted practical training?  Yes  No If YES, please indicate type and dates:

CPT MM / DD / YYYY - MM / DD / YYYY

OPT MM / DD / YYYY - MM / DD / YYYY

If admitted to PCC, what will be the SEVIS release date? MM / DD / YYYY

*\*Please do not transfer a student that has been terminated or completed in SEVIS.*

**SEVIS School Code: Portland Community College Rock Creek - POO 214F00164000**

Name of Institution: \_\_\_\_\_ Address: \_\_\_\_\_

Form Completed By (name and title): \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

School Official Signature: \_\_\_\_\_ Date: MM / DD / YYYY