Erikson Institute requests the following necessary information so that we may correctly prepare your SEVIS I-20, which you need to enroll. Please be advised that both Section A and Section B must be completed. Once complete, you can submit the form to the Executive Director of Marketing & Admissions.

Please be aware that Erikson Institute will not be able to process your SEVIS I-20 and send it to you until after your school’s release date has been reached.

- F-1 international students are only considered as a SEVIS transfer student if they are currently in a valid F-1 status and no more than 5 months have passed from the last date of attendance or the last day of OPT (whichever is later) to the start of classes.
- The release date must only be after completion of all courses, exams, and work such as OPT/CPT. This must happen within 60 days of the program end date or OPT end date.
- If you are on OPT from a previous degree program, selecting the SEVIS transfer release date during the approved OPT period will end your OPT work authorization.
- You should not request your SEVIS record to be transferred until you are certain you will be enrolling.
- You must be in good standing at your current institution, and you must enroll in the next academic term after leaving your current institution. Your first course at Erikson Institute must be within 5 months of your prior institution’s enrollment or post-completion OPT end date.

If you ARE NOT traveling outside of the United States prior to enrolling at Erikson Institute:

1. Notify your current/most recent international student advisor of your intent to enroll at Erikson Institute.
2. In addition to the Statement of Financial Support, please provide the following documents:
   a. Transfer Release Form
   b. A copy of your most recent Form I-20
   c. A copy of your current passport, visa and Form I-94
3. Your current/most recent international student advisor must complete Part B of the Transfer Release Form and then fax or mail the completed form WITH a copy of the Form I-20 to the Executive Director of Marketing & Admissions.
4. Once your documents are received, the Executive Director of Marketing & Admissions will process your transfer by producing your Erikson Form I-20. You will receive your Erikson Form I-20 the day after New Student Orientation.
If you ARE traveling outside of the United States prior to enrolling at Erikson Institute:

1. Notify your current/most recent international student advisor of your intent to enroll at Erikson Institute.
2. In addition to the Statement of Financial Support, please provide the following documents:
   a. Transfer Release Form
   b. A copy of your most recent Form I-20
   c. A copy of your current passport, visa and Form I-94
3. Your current/most recent international student advisor must complete Part B of the Transfer Release Form and then fax or mail the completed form WITH a copy of the Form I-20 to the Executive Director of Marketing & Admissions.
4. Once your documents are received, the Executive Director of Marketing & Admissions will process your transfer by producing your Erikson Form I-20. You will receive your Erikson Form I-20 via U.S. mail at the address you have provided.
5. If your F-1 visa has expired, is not valid at your time of re-enter into the U.S., or you never were issued one, you will need to apply for one at the nearest U.S. consulate/embassy in your home country.
6. You cannot re-enter the U.S. without a valid visa.
7. If your F-1 visa from your current/most recent institution has not expired at the time of your re-enter into the U.S., you do not need to apply for a new F-1 visa.
8. Upon entry to the U.S., present your Erikson Form I-20 to the immigration agent at the port of entry. The agent will stamp your passport, I-94 and Form I-20.
9. We will make photocopies of your documents (I-20, passport, F-1 student visa, and I-94 card) during New Student Orientation.

Amy Mikel
Executive Director of Marketing & Admissions

Erikson Institute
451 N. LaSalle Street
Chicago, Illinois  60654-4510

amikel@erikson.edu       Telephone: 312.374.5879       Fax: 312.755.0928
International Student Transfer Release Form

Part A: To Be Completed by Student

Print your name as it appears in your passport:

__________________________________________  ____________________________________________  ____________________________________________
Family (Surname)  Given/First Name  Middle Name

Date of Birth: ____________________________  Country of Citizenship: ____________________________
Month    Day    Year

Current Address in the U.S.

__________________________________________  ____________________________________________
Street Number & Address  Unit Number

__________________________________________  ____________________________________________
City  State  Zip Code

Email _____________________________________  Phone Number ________________________________

I will be traveling outside of the United States before enrolling at Erikson Institute: ☐ Yes  ☐ No

If yes, provide dates of travel:
__________________________________________  ____________________________________________
Departure  Return

For those traveling outside of the U.S., will you need to apply for a new visa?  ☐ Yes  ☐ No

If yes, please provide the approximate date of your visa appointment: ____________________________

Name of Current School: ____________________________

I have been admitted to the following degree program at Erikson Institute:

☐ M.S. in Child Development
☐ Master of Social Work
☐ M.S. in Early Childhood Education (initial licensure)

Note: If you are a PhD student, you will need to work with Loyola University Chicago as they maintain international student's needs.

My signature certifies that all information provided on this form is complete and accurate. I authorize my current DSO/international student advisor to verify the above information, to provide the additional information requested below and release my SEVIS record to Erikson Institute.

Signature of Student: ____________________________  Date: ____________________________
PART B: To Be Completed by
Designated School Official (DSO)

The student above has been admitted to Erikson Institute and has notified us of her/his intent to transfer from your institution. Please answer the following questions so that we may complete the SEVIS I-20 transfer process.

Please release to: Erikson Institute, SEVIS Code: CHI214F01593000

SEVIS ID: ____________________________ Release Date: ____________________________

Family (Surname) ____________________________ First Name ____________________________ Middle Name ____________________________

Student is: □ in status according to USCIS regulations and is eligible for transfer
□ NOT in status (please use the comments section below to explain)

If student is not in status, has student applied for reinstatement? □ Yes □ No
If yes, date of reinstatement application: ____________________________ Which USCIS Office? ____________

Comments: __________________________________________________________________________

_____________________________________________________________________________________

Last date of attendance in current program: __________________________________________________________________________________________

Please list any period of Practical Training and whether it was full-time or part-time:

1. Curricular: __________________________________________________________________________

2. Optional: __________________________________________________________________________

Name of current university/college/school: __________________________________________________________________________________________

SEVIS school code of current university/college/school: ________________________________________________________________________________

International Student Advisor Signature: ___________________________________________________________________________________________

Name: ____________________________________________ Title: ____________________________

Institution: ____________________________________________ Telephone: ____________________________

E-mail Address: ____________________________________________ Date: ____________________________