

J-1 EXCHANGE VISITOR TRANSFER IN FORM

To be completed by the Official TIEC Car	mpus Representative at the new institution:
EV's Family Name:	EV's First/Given Name:
EV's Date of Birth:	Transfer Effective Date:
	(MM/DD/YYYY)
Proposed Program Objective at TIEC Instit	tution:
Campus Representative:	Email:
Signature:	Date:
To be completed by the <i>J-1 Exchange Vis</i>	sitor (EV):
Family Name:	First/Given Name:
·	and I am eligible for a J-1 program transfer. I request a m from to
I understand that if I do not report to th	e Responsible Officer at the transferring institution on or ny SEVIS record will be terminated and I will be considered
EV's Signature:	Date:
To be completed by the <i>J Visa RO/ARO</i> a	t the current sponsor institution:
1. Is the EV maintaining valid J-1 visa statu	ıs? 🔲 Y / 🔲 N
2. Is the EV's current program objective the same as the one indicated above? \square Y / \square N	
3. If the EV is subject to 212(e), has a waiver been filed or obtained? \square Y / \square N	
4. Is the transfer release date listed above acceptable?	
EV SEVIS #:	Transfer Effective Date:
Additional Comments:	(MM/DD/YYYY)
RO/ARO Name/Title:	Email:
Institution:	
RO/ARO Signature:	Nate:



Additional Forms and Documents

The exchange visitor must also submit the following supporting documents:

- 1. <u>TIEC J-1 Exchange Visitor Information Sheet</u> and all attachments (to be filled out and submitted separately)
- 2. Copy of 1-94 forms for the exchange visitor and, if applicable, all dependents
- 3. Copy of J visas for the exchange visitor and, if applicable, all dependents