



## J-1 EXCHANGE VISITOR TRANSFER OUT FORM

**To be completed by the *Designated Campus Representative* at the current institution:**

EV's Family Name: \_\_\_\_\_ EV's First/Given Name: \_\_\_\_\_

EV's Date of Birth: \_\_\_\_\_ Transfer Effective Date: \_\_\_\_\_  
(MM/DD/YYYY) (MM/DD/YYYY)

SEVIS #: \_\_\_\_\_ EV Category: \_\_\_\_\_

Subject/Field Code: \_\_\_\_\_

Campus Representative: \_\_\_\_\_ Email: \_\_\_\_\_

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

**To be completed by the *J-1 exchange visitor (EV)*:**

Family Name: \_\_\_\_\_ First/Given Name: \_\_\_\_\_

I hereby authorize the Texas International Education Consortium to transfer my SEVIS record to the new program listed below effective on \_\_\_\_\_.  
(MM/DD/YYYY)

EV's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To be completed by the *J Visa RO/ARO* at the new institution:**

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

EV Program Number: \_\_\_\_\_ Transfer Effective Date: \_\_\_\_\_

Program Objective: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

RO/ARO Name/Title: \_\_\_\_\_ Email: \_\_\_\_\_

RO/ARO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Texas International Education Consortium**

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