



This form should be completed by J-1 scholars wishing to transfer out of the University of Central Florida. Please submit transfer out requests at least 30 days prior to the current program end date.

GENERAL INSTRUCTIONS

- Complete and sign the scholar portion of this form
- Obtain authorization and signature from immediate supervisor
- Submit this form, along with offer letter from new program sponsor, to UCF Global for review

SCHOLAR SECTION	
UCF ID:	SEVIS Number: N
First Name:	Family Name / Surname:
Date of Birth (MM/DD/YYYY):	Legal Sex: Male Female
Country of Birth:	City of Birth:
Country of Citizenship:	
Country of Permanent Residence:	
I REQUEST THAT UCF GLOBAL RELEASE MY SEVIS RE	CORD TO THE FOLLOWING PROGRAM SPONSOR:
Name of Institution:	
Program Number:	Transfer Release Date (MM/DD/YYYY):
Immigration Advisor Name:	Telephone:
Immigration Advisor Email:	
Scholar Signature:	Date (MM/DD/YYYY):
☐ I request UCF Global to release my SEVIS record to the institution listed above and give permission for UCF Global to communicate with my new program sponsor regarding my transfer.	
UCF SUPERVISOR SECTION	
☐ I am aware of and approve this scholar's transfer of has settled all outstanding obligations with the depart	out of the University of Central Florida. The scholar in question rtment.
Supervisor Name:	
Supervisor Title:	
Supervisor Signature:	Date: