



J-1 SCHOLAR TRANSFER-OUT FORM

Name: CSU ID Number:

Email Address: Phone Number:

CSU Academic Department: Faculty Supervisor:

Name of New Program:

Field of Research/Teaching/Other J-1 Activity at New Program:

Start Date of New Program/Date of Requested Transfer:

There cannot be a gap of time between the completion of your program at CSU and the start of your new program.

Please list the name and contact information for the J-1 Responsible Officer (RO) or Alternate Responsible Officer (ARO) at the new program. This information is required, as CSU's ISSS office must communicate with your new program before we can enter a J-1 program transfer into the SEVIS system.

A/RO's Name: Phone Number:

A/RO's Email Address:

I request CSU's International Student and Scholar Services office to transfer my J-1 SEVIS record to the program mentioned above and to communicate with the other program's A/RO regarding this transfer.

Scholar's Signature: Date:

To be Completed by Scholar's Faculty Supervisor at CSU:

Scholar's Last Day at CSU:

By checking this box, I confirm this J-1 scholar made satisfactory progress toward completion of J-1 program objectives throughout the program at Colorado State University. I approve of this transfer.

Supervisor's Name: Academic Department:

Signature: Date: