



# F-1 Transfer Student Information

Please complete the first section of this form and ask the advisor at your current school to complete the second section. Then, email it back to [info@highexpectationsusa.com](mailto:info@highexpectationsusa.com). This form is a request for information about your F-1 status, SEVIS record, and is part of High Expectations Application for F-1 transfer students who are currently at another U.S. school. This form does not ask for the release of your SEVIS record. **High Expectations LLC - BOS214F58475000**

## To be completed by the student

Passport last name	Passport first name	Middle name (if any)
Student ID number (at current school)	Student SEVIS ID number	Date of birth (mm/dd/yy)
Last quarter/semester/session attended	Phone	Email

Do you plan to travel outside of the U.S. before beginning your studies at High Expectations?  Yes  No

**By signing below, I authorized a school official at my current school to provide High Expectations with the information below.**

Signature of Student (required)	Date
---------------------------------	------

## To be completed by an International Student Advisor / DSO

Name of DSO	Title		
Name of institution	Address	City	State
Phone	Email		

### To the best of my knowledge, the above-named student is

Enrolled full time at this school in the session:  Yes  No, because \_\_\_\_\_

In status with respect to immigration regulations:  Yes  No, out of status because \_\_\_\_\_

Eligible to continue at our school:  Yes  No, because \_\_\_\_\_

Is currently placed on academic probation:  Yes  No

Previously authorized reduced course load (reason): \_\_\_\_\_  N/A

Last authorized vacation quarter: \_\_\_\_\_ Previously approved OPT/CPT Dates (if any): \_\_\_\_\_

Date of attendance at your school: From (mm/dd/yy) \_\_\_\_\_ To (mm/dd/yy) \_\_\_\_\_

### To the best of my knowledge, the student's SEVIS record will be released in Active status with confirmation of acceptance.

Yes  No, because \_\_\_\_\_

Additional comment (e.g. attendance issue) \_\_\_\_\_

Signature of DSO (required) \_\_\_\_\_ Date \_\_\_\_\_

**This form is for information only. It is NOT a request for the SEVIS record. Please email form to: [info@highexpectationsusa.com](mailto:info@highexpectationsusa.com)**