



## Transfer-Out Request

### **Part I: To be completed by student:**

I, \_\_\_\_\_  
Please print: Last/family Name First Middle

\_\_\_\_\_, wish to inform Academy at the Lakes, that (check one):  
SEVIS ID Number \_\_\_\_\_

I was admitted to:

I have applied and expect to be admitted to:

For:  
\_\_\_\_\_  
School Name semester/term/year

and request that my SEVIS record be released to that school on \_\_\_\_\_  
date

(I understand that *the earliest date my record may be released is the end of the current term.*)

### **Statement of Understanding:**

*I understand that:*

1. On the release date, the responsibility for my SEVIS record transfers to my new school. Academy at the Lakes may not access my record in any way.
2. Should my plans change, I will contact Academy at the Lakes **prior** to the release date, or my new school if after the release date.
3. I must pay any remaining tuition balance to Academy at the Lakes before I will be able to receive an official transcript.
4. I must obtain a new Form I-20 from my new school as soon as possible after the release date. My old I-20s must be retained as records. Should I wish to travel, I must use my new school's I-20 to reenter the U.S.
5. I am required to enroll full time at my new school by the program start date on my new Form I-20.
6. I am required to report to the Designated School Official at my new school no later than 15 days after my program start date.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**PART II: To be completed by the international student advisor or designated school official at the Transfer-In school.**

I confirm that the student named on the front side of this form, has been:

- admitted
- has applied for admission

and recommend that his/her SEVIS record be released to:

School name: \_\_\_\_\_

Address: \_\_\_\_\_

SEVIS School Code: \_\_\_\_\_

Name of Designated School Official: \_\_\_\_\_

*Please Print*

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of International Student Advisor/P/DSO \_\_\_\_\_

**Please return this form to:**

**Melissa Starkey, Associate Director of Admissions**

Academy at the Lakes

2331 Collier Parkway

Land O' Lakes, FL 33647

Phone: (813) 909-7919 Fax: (813) 949-0563