

SEVIS RELEASE DATE

Office American Language Academy

West Quad 235 Phone: 718-951-4477 Fax: 718 -951-4286

Email: ALA@brooklyn.cuny.edu

INTERNATIONAL STUDENT SEVIS TRANSFER VERIFICATION FORM

-For students that attended a school in the United States in F1 visa status-

SEVIS name: The City University of New York Brooklyn College (ALA) School code: NYC214F00812022

-We can only issue an I-20 when the previous school releases the student record to Brooklyn College in SEVIS-

SECTION A - TO BE COMPLETED BY THE STUDENT

SEVIS # N		USCIS Admission #					
					licated on the I-94 depar		
NAM	E (print)						
	Last	First		Middle			
	nd to transfer to Brooklyn College ALA fo <u>r</u> e my SEVIS record to this institution.		Term/seme	e ster and h	ereby grant permiss	ion for you to	
Student's Signature			Date				
	SECTION B - TO BE	COMPLETE	D BY THE F	PREVIOUS	SCHOOL		
IS TH	HE STUDENT AUTHORIZED BY USCIS T	O ATTEND Y	OUR INSTI	ITUTION?	☐ YES ☐ NO		
	Registered in a full-time course of study through the	Se	emester		Year		
	Registered in less than a full-time course of study. Please provide explanation in the comments section below.						
	Completed the course of study at your scho		emester		Year		
	Did not complete the course of study but terminated attendance on						
	Completed the course of study and is engaged in *Post Completion OPT *from to						
	RECORDS INDICATE THAT THE STUDI RACTICAL TRAINING:	ENT USED TH	HE FOLLOV	VING AMO		10	
Pre-c	ompletion:month(s) Post-	completion	n	nonth(s)	Curricular	month(s)	
COM	MENTS						
Name	and Title						
Institution			Teleph	one			
Addre	ess		E-mail				
Signature			Date				