



Transfer Verification Form For F-1 students transferring to Rush University

Instructions: The top portion of this form is to be completed by you, the F-1 student transferring to Rush University. After completing the top portion, please give the form to the international student advisor at your current institution. Once completed, please email the form to Rush University International Student Services (international_students@rush.edu).

TO BE COMPLETED BY STUDENT

Name: _____ Date of Birth: _____
(Last) (First) (Middle) (mm /dd/yyyy)

I hereby grant permission for the information requested below to be provided to Rush University.

Signature _____ Date _____

TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR

Please complete the bottom portion of this form for the F-1 student listed above and submit to Rush University (**CHI214F00776000**) International Student Services by email (international_students@rush.edu).

Student SEVIS #: _____ SEVIS Release Date: _____
(mm /dd/yyyy)

Current Program/Level: _____ Date of last attendance at your institution: _____
(mm /dd/yyyy)

To the best of your knowledge, is the student in valid immigration status? Yes No

Any authorized Reduced Course Load: Academic Medical (Number of Months: _____) Last Semester

Any authorized Practical Training: CPT OPT Dates: _____ to _____
(mm /dd/yyyy) (mm /dd/yyyy)

Comments:

If you have questions, please email international_students@rush.edu. Thanks!

DSO/PDSO Name: _____

Title: _____

Institution: _____

Phone#: _____

Email: _____

DSO/PDSO Signature: _____

Date: _____