



Office of International Students & Scholars  
Santa Barbara, California 93106-7150  
Program Number: P-1-03332

Telephone: (805) 893-2929 Fax: (805) 893-7132  
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## Transfer OUT Form for J-1 Students

### SECTION 1: TO BE COMPLETED BY J-1 Student

- Please complete the section below and submit the form to the International Students and Scholars Office of the School/Institute you will be transferring to.

Last (Family Name): \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
*As in Passport*

SEVIS ID Number: N \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Current J-1 Program Dates on DS-2019: \_\_\_\_\_ to \_\_\_\_\_  
*Start Date End Date*

Any J-2 Dependents? : \_\_\_ Y / N \_\_\_ Date to be released in SEVIS: \_\_\_\_\_

Reason for Transfer: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 2: TO BE COMPLETED BY RESPONSIBLE SCHOOL OFFICER OF TRANSFER – TO SCHOOL

- The J1- Student listed above has expressed his/her intent to transfer from The University of California, Santa Barbara, **Program Number: P-1-03332**. Please complete the form below and submit to OISS by fax **(805) 893-7132**. If you have any question or concerns, please contact Ambi Harsha, Immigration Analyst at (805) 893-2211 or e-mail: [harsha-a@sa.ucsb.edu](mailto:harsha-a@sa.ucsb.edu)

I confirm that the following J-1 Student will be transferred to \_\_\_\_\_  
*Name of School/ Institute*

in SEVIS effective on: \_\_\_\_\_ . Program Number: \_\_\_\_\_  
*Date*

Name and Title of J-1 Responsible Officer: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Signature of J-1 Responsible Officer: \_\_\_\_\_ Date: \_\_\_\_\_

<b>FOR OISS USE:</b>		<b>Date Released in SEVIS:</b> _____
_____	_____	_____
<b>Name of Processor</b>	<b>Signature</b>	<b>Date</b>