

HAMILTON COLLEGE

International Student Services
Days-Massolo Center
315-859-4288

F-1 TRANSFER-IN FORM

Section A: To Be Completed By Student Requesting Transfer

Last/Family Name: _____ First/Given Name: _____ Middle Name: _____

Email Address: _____ Phone Number: _____

Semester and year you will enter Hamilton College: _____

Please indicate your travel plans before entering Hamilton:

- Remain in the US (Your Transfer I-20 can be picked up at Hamilton when you arrive)
- Traveling internationally (*Please complete the information below*)
Please indicate the international address for your Transfer Pending I-20—required for entering the US to attend Hamilton College.

Street: _____ City: _____

Province/State: _____ Postal Code: _____ Country: _____

International Phone Number: _____

Student Signature

Date

Section B: To Be Completed By Transfer-Out School International Office

Name of Institution: _____ City: _____

International student advisor at current institution: _____

Advisor's email: _____ Advisor's phone: _____

SEVIS ID: N _____ **Transfer Release Date:** _____

Is this student in valid F-1 status and eligible for transfer? _____

Please indicate any employment authorization or reduced course loads with dates: _____

Signature

Date

Release to Hamilton College, School Code: BUF214F10221000

Please scan and email this form to iss@hamilton.edu