

# UNIVERSITY OF SOUTH LOS ANGELES

1045 W. REDONDO BEACH BLVD.  
GARDENA, CA 90247  
(310) 756-0001 | FAX: (310) 756-0004  
USLA.EDU

NOTICE OF  
**INTENT TO TRANSFER**  
SCHOOL CODE: LOS214F01918000

## STUDENT INFORMATION

*Students must fill out this section. All students who are currently on an F-1 visa and wish to transfer to University of South Los Angeles must have this status verification form completed by the institution you were last authorized to attend.*

Student's Name (Last, First): \_\_\_\_\_ Gender:  Male  Female

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Intended Transfer Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

SEVIS #: \_\_\_\_\_ Admission Number (I-94): \_\_\_\_\_

Student's Overseas Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

*By signing this form, I acknowledge my intent to attend University of South Los Angeles and give permission for my former school to release any needed information from my files.*

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

## INSTITUTION INFORMATION

*This is to verify that the above named student has applied for admission to University of South Los Angeles. Please provide the following information.*

Name of Institution: \_\_\_\_\_

Dates Attended: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Anticipated Last Day of Attendance: \_\_\_\_/\_\_\_\_/\_\_\_\_

SEVIS Release Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  In Status  Not in Status \_\_\_\_\_

Is this school currently registered as a SEVIS School?  Yes  No

Designated School Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Title: \_\_\_\_\_ INS School File Number: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_-\_\_\_\_

Email: \_\_\_\_\_ Official Seal/Stamp: \_\_\_\_\_