

Transfer I-20 Authorization Form

The student named below intends to transfer to Nova Southeastern University. In accordance with USCIS regulations, we must ascertain the status of this student. Please complete and return this form to intl@nova.edu. If you have any questions, please contact the Office of International Students and Scholars at (800) 541-6682 ext. 7240.

TO BE FILLED OUT BY STUDENT

I, _____, intend to transfer to Nova Southeastern University. I grant permission for the information requested to be forwarded to NSU.		
_____ Signature	_____ Date	N _____ Student ID

TO BE FILLED OUT BY THE DESIGNATED SCHOOL OFFICIAL From the Transferring School

SEVIS Identification Number N _____	Transfer Release Date _____	
1. Was this student authorized by USCIS to attend your school? <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Was this student out of status at any time? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please explain: _____		
3. Date of student's last attendance: _____		
4. Indicate student's level: <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctoral <input type="checkbox"/> Language Training		
<input type="checkbox"/> Other (please indicate) _____		
5. Did the student complete the course of study? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6. Did the student request Optional Practical Training (OPT)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, provide the OPT dates: Start Date: _____ End Date: _____		
_____ Name of P/DSO	_____ Title	
_____ Name of Institution	_____ City/State	_____ Phone Number
_____ Signature of P/DSO	_____ Date	

Please send to: Nova Southeastern University
Attn: Office of International Students and Scholars
3300 S. University Drive Fort Lauderdale, FL
33328-2004 **E-Mail:** intl@nova.edu