

**J-1 Student Transfer-In Request**  
**International Student and Scholar Services (ISSS)**  
Tel: +1-404-727-3300 ● [www.iss.emory.edu](http://www.iss.emory.edu)



**EMORY**  
UNIVERSITY

This form should be completed by anyone who have been invited to Emory University as a J-1 Student, but who are currently in J-1 Student status at another institution in the United States. Students should work with the A/RO at their current institution to provide the information requested below. Upon completion, students should upload a PDF copy of the completed form in Emory's ISSS Link as part of the J-1 Student DS-2019 Request e-form.

**A: To be completed by the transferring J-1 Student**

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Primary/Last) (First/Given) (Middle)

Date of Birth: *Month:* \_\_\_\_\_ *Day:* \_\_\_\_\_ *Year:* \_\_\_\_\_ Email: \_\_\_\_\_

Note: Travel outside the US and re-entry using an Emory University DS-2019 will not be possible until the SEVIS release date as noted below in Section B below, as we are unable to access your SEVIS record until that date. If you plan to travel prior to the SEVIS Release Date, please immediately consult [your Emory ISSS advisor](#).

*I hereby give permission for the information on this form to be forwarded to Emory University ISSS.*

J-1 Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

**B: To be completed by the A/RO at J-1 Student's current institution (not Emory University)**

**Note to A/RO at student's current institution:** An Emory ISSS advisor will contact you to arrange the transfer of the student's SEVIS record. **Please do not transfer the SEVIS record until you have heard from Emory ISSS.**

Name of Institution: \_\_\_\_\_ EV Program #: \_\_\_\_\_

J-1 Student's SEVIS ID #: \_\_\_\_\_ Field code on current DS-2019: \_\_\_\_\_ Field of major: \_\_\_\_\_

J-1 Student's start date at your institution: *Month:* \_\_\_\_\_ *Day:* \_\_\_\_\_ *Year:* \_\_\_\_\_

J-1 Student's last date at your institution: *Month:* \_\_\_\_\_ *Day:* \_\_\_\_\_ *Year:* \_\_\_\_\_

J-1 Category:  Student Bachelors  Student Masters  Student Doctorate  Student Non-Degree

Has this student been granted Academic Training (AT)  Yes  No

If yes, list the AT start and end date for each Academic Training authorization:

SEVIS Release Date: *Month:* \_\_\_\_\_ *Day:* \_\_\_\_\_ *Year:* \_\_\_\_\_

To the best of your knowledge, is this student in valid J-1 status and eligible for J-1 transfer?  Yes  No

If *No*, please comment: \_\_\_\_\_

Name of RO or ARO: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of RO/ARO: \_\_\_\_\_ Date: \_\_\_\_\_