

**F1 STUDENT TRANSFER ELIGIBILITY FORM**

F-1 student applicants transferring the I-20 from an institution in the United States (U.S.) to Broward College (BC) must complete this form as part of the application process to verify the student's F-1 immigration status. This form does not constitute proof of acceptance. The student will complete *Section I* and give the form to the Designated School Official (DSO) at the current school to complete *Section II*. The completed form must be sent by email to the **International Student Services Office (ISSO)** at [ISSO@broward.edu](mailto:ISSO@broward.edu).

**NOTE TO STUDENT:** Once the I-20 is released to BC, after acceptance, any authorized employment and/or remaining Optional Practical Training (OPT) will end. It will take a couple of weeks for the transfer I-20 to be processed. Students need to plan in advance in case there is a need to obtain the I-20 to travel, renew the driver's license or for another reason.

**Section I - To be completed by the student:**

Broward College Student ID Number: \_\_\_\_\_ Application Term:    Fall    Spring    Summer

Name: \_\_\_\_\_  
(as it appears on passport)                      Last Name/Family Name/Surname                      First Name Middle Name

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Please indicate which **Broward College** campus you will attend, **ONCE ACCEPTED:**  
Central Campus / Davie, FL / SEVIS school code: MIA214F00130001  
South Campus / Pembroke Pines, FL / SEVIS school code: MIA214F00130003  
North Campus / Coconut Creek, FL / SEVIS school code: MIA214F00130002

**STUDENT'S SIGNATURE** \_\_\_\_\_

**NOTE:** The signature authorizes the current school to provide us with the information needed to complete the application process.

**Section II - To be completed by the Designated School Official (DSO):** This form is to be emailed to [ISSO@broward.edu](mailto:ISSO@broward.edu). **DSO, please do not release the I-20 to Broward College (BC) until the student provides an acceptance letter. This form is only to acknowledge the student's current F1 status at your institution and it does not constitute acceptance nor approval to transfer.**

1. Student's SEVIS ID Number: \_\_\_\_\_
2. Last date the student was enrolled at your institution: \_\_\_\_\_ (MM/DD/YYYY)  
Did the student graduate? (YES/NO) \_\_\_\_\_
3. Is the student currently in status? (YES/NO) \_\_\_\_\_  
If NO, has a reinstatement application been filed? (YES/NO) \_\_\_\_\_ Date of termination in SEVIS: \_\_\_\_\_ (MM/DD/YYYY)
4. SEVIS Transfer Release Date: \_\_\_\_\_ (MM/DD/YYYY) OR                      Upon acceptance

History of Optional Practical Training (OPT), Curricular Practical Training (CPT) and/or Medical Reduced Course Load (RCL) authorizations (if applicable):

OPT: Dates Authorized FROM \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_                      Full-time or                      Part time  
CPT: Dates Authorized FROM \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_                      Full-time or                      Part time  
RCL: Dates Authorized FROM \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
Name of PDSO/DSO                      Title                      Email

\_\_\_\_\_  
Name of Institution                      Address, City, State and Zip Code

\_\_\_\_\_  
PDSO /DSO Signature                      Phone Number                      Date (MM/DD/YYYY)

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