

TRANSFER REQUEST FORM FOR F-1 STUDENTS

Part 1: Completed by student:

NAME: _____

Date of birth: _____ SEVIS ID # (top right of I 20): N_____

Telephone: _____ Email: _____

NYFA has three location s- please be careful to transfer the SEVIS record to the following location:

NEW YORK FILM ACADEMY LOS ANGELES (LOS214F02008000)

What is the release date that you and your current school agreed on for your I-20 to be transferred to NYFA?

Release Immediately **OR** **Requested release date:** _____

Note: You may transfer at any time as long as you are in good status (you must continue to attend class until the I-20 is released to NYFA) or in the 60 days after your program end date. You must attend the next available start date of your chosen NYFA program, not to exceed 5 months from day of last attendance at current school.

I intend to transfer to New York Film Academy and request that you transfer my SEVIS record.

Signature: _____ Date: _____

CONTACT INFO FOR NYFA LOS ANGELES:

Fax 818-333-3557 Tel: 818-333-3558 Email: LAInternational@nyfa.edu

Part 2: Completed by SEVP Designated School Official at the Transfer Out school:

***** NYFA has two locations- please be careful to transfer the SEVIS record to the correct location.**

If there is an issue with the transfer request or if the record is in TERMINATED or COMPLETED status, please contact us to discuss.

- I have received this students request to transfer
- I will either transfer the record as requested by the student or will contact NYFA before transferring if the record is not in ACTIVE status or if there are any issues or questions.

Name of designated school official: _____

Name of school: _____

Address of school: _____

Telephone: _____ Email: _____

Signature: _____ Date: _____