

## J-1 Transfer In Form For Scholars

## **Instructions**: Before completing this form, J-1 Exchange Visitor must:

- Be in the U.S. in valid J-1 status.
- Have received an appointment offer (J-1 Professor/Research Scholar/Short-Term Scholars category).
- Look up your (and your dependents') most recent I-94(s) and confirm they reflect J-1 or J-2 status and a 'D/S' Admit Until Date. Please include PDFs of the I-94(s) when submitting this form to OISS.

Submit this form to your WashU host department contact along with other required documents.

Please note:

- All J-1 visa holders **must** check in with OISS as soon as possible on or after your transfer release date to process and finalize the transfer within SEVIS. OISS will provide specific instructions on transfer completion separately.
- International travel may invalidate your J-1 transfer eligibility. If you need to travel outside the U.S. during this transition, you must consult with your OISS adviser.
- WashU will not be able to issue your DS-2019 until your "transfer release date" has been reached and you check in with OISS.

Section I - To be completed by the J-1 ex Name:	xchange visitor (type or print)	
Family/Surname as noted on your passport	First/Given Name as noted on your passport	Middle Name
Date of Birth:	Email:	
WashU school/department to which you have	ve been accepted/appointed:	
Program/Appointment start date:		
Please list dates for any international travel p	planned between now and your WashU appointment/program s	tart date (above):
Have you applied for a 2-year home residence	ce requirement waiver? No Yes, DS-3035 case #	:
I authorize the international adviser to provi	ide the information requested below to WashU.	
Signature:	Date:	
Section II - To be completed by the Inte	ernational Adviser (RO/ARO) at transfer-out institution	
Name of Institution:	EV Program Number:	
Exchange Visitor's SEVIS ID #:	Start date/first entry to the U.S.:	
Start and end dates of current program: S	itart End	
Subject/Field code on current DS-2019:	J-1 Category:	
Subject/Field Code Description:		
SEVIS Transfer Release Date:	Are there any dependents in the scho No Yes: how many?	lar's SEVIS record?
If student, has the Exchange Visitor been aut provide dates:	thorized for any period of Academic Training? If yes, Yes	No
To your knowledge, has the Exchange Visitor please explain:	acted in accordance with DOS regulations? If no, Yes	No
Name and Title of RO/ARO:		
Telephone:	Email:	
Signature:	Date:	