

Massachusetts Institute of Technology

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Phone 617-253-3795 Fax 617-258-5483 Email iso-help@mit.edu

MIT Transfer In Form

If you are currently in the US on F-1 or J-1 immigration status at another institution, please ask an international student advisor at your current institution or immigration sponsoring organization to complete the form below and return it to us as soon as possible. Please note that if you are traveling outside the U.S. between completion of your current program and start at MIT that you should be in contact with your MIT ISO Advisor regarding if we will process a "Transfer" Form I-20 or if a new "Initial Attendance" Form I-20 will be required. Once you arrive at MIT, please complete required Online Check-In and orientation procedures with the ISO. After completion of these requirements, the ISO advisor will then endorse your I-20 or DS-2019 and notify DHS that you are now a student at MIT. This notification process is required in order for you to maintain your F-1 or J-1 immigration status. Failure to complete the process will put you out of status.

SECTION I — TO BE COMPLETED BY	STUDENT	
Name of Student:		
Last Name	First Name	
Date of Birth: (mm/dd/yyyy)	MII ID #	_
Semester that you are enrolling at MIT: Fall/	Spring	Department:
Degree level for which you are applying:	Bachelor's N	Master's Ph.D. (check one)
Current U.S. Address:		
I intend to enroll at the Massachusetts Insti permission to transfer my electronic immig		IT) during the semester stated above. I hereby grant
Signature		Date
SECTION II — TO BE COMPLETED BY at school or immigration		
Institution/Program Sponsor Name:		City, State:
		tended transfer release date:
Provide any dates student was approved for 0	CPT/OPT or Academic T	raining:
From	To f	full time or part time? (please circle)
Does the student have any dependents? If so	, how many?	
Additional Comments:		
For reference, MIT's J Program Number & I J Program Number: P-1-00039 Scho		s below: sachusetts Institute of Technology, BOS214F00219000
I certify that the student named above has b	een/has not been (plea	ase circle one) pursuing a full course of study at our
institution during the semester immediately	preceding this intended	transfer (or during the last semester preceding the annu
vacation). I further certify that to the best of	of my knowledge the ab	ove named student has maintained his/her legal status.
Signature		 Date
Name and title (please print)		School Name or Immigration Sponsor Organization
Email		Phone Number

Please return this form to the student for upload to MIT's system or fax this form to the address above. as 9/2016