



TRANSFER DECISION FORM

I have been accepted for admission to:

Institution/College

Street Address

City State Zip

for the _____ semester, 20 _____.
(fall/spring/summer)

I request that my SEVIS records be released to the above school on _____.
(MM/DD/YYYY)

I understand that on this release date my SEVIS information is no longer available to Butler Community College and all procedures must be completed through the new school.

If you decide not to transfer to the new school *prior* to the release date, this transfer may be cancelled by formally notifying a Butler international advisor. **PLEASE NOTE: *After the release date, you cannot cancel the transfer through Butler and your new school now has responsibility for your records.***

You are considered out of status if you do not contact the international advisor at your new school within 15 days of the program start date on your new I-20. Transfer procedures are not completed until you enroll in classes and your new school registers this enrollment in SEVIS.

Print Name (Last, First) Signature Date

SEVIS ID# Date of Birth Country of Citizenship

Butler ID or Social Security

PLEASE RETURN THIS FORM TO:

International Student Advisor
Butler Community College
901 S Haverhill Rd.
El Dorado, KS 67042
EMAIL: international@butlercc.edu
FAX: 316-323-6852