



International Student & Scholar Services

201 Technology Plaza | 616 E. Green Street | Champaign, IL 61820 | P. (217) 333-1303 | F. (217) 265-4252 | iss-scholars@illinois.edu

TRANSFER OUT REQUEST FOR J-1 SCHOLARS

Instructions for the J-1 scholar: Please complete Section A of this form and then have your Department Head complete Section B. After both Sections A and B have been completed, you will need to forward this form to the International Scholar Office at your new institution. The new institution will then complete Section C and email the request to our office. Your transfer request will not be processed until we receive the completed form.

Section A to be completed by the transferring J-1 scholar

Name: _____
Family/Last Name First Name Middle Name

Date of birth: _____(mm/dd/yyyy) Requested date of transfer: _____(mm/dd/yyyy)

E-mail: _____ Phone: _____

Have you applied for or received a waiver of the two-year home residency / 212(e) requirement from the US Department of State? No Yes

Scholar's signature: _____ **Date:** _____

Section B to be completed by the Department Head of the scholar's current host department

This certifies that the Department of _____ agrees with the transfer release of the above named scholar from the University of Illinois at Urbana-Champaign. The scholar cannot be employed at Illinois after the transfer date listed above.

Name of Department Head: _____

Signature of Department Head: _____ **Date:** _____

Section C to be completed by the scholar advisor (RO/ARO) at the new institution

Name of institution: _____

Program Number: _____

I confirm that the J-1 scholar listed above has been invited to transfer to our institution on the date listed above.

Name of RO or ARO: _____ Title: _____

Phone: _____ E-mail: _____

Signature of RO/ARO: _____ **Date:** _____

Please return the completed form to International Student and Scholar Services by email at iss-scholars@illinois.edu. Thank you!