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F-1 Student Transfer Clearance Form

Student: Please complete Section One of this form. The international student advisor at the school you are currently attending must complete section two of this form. Your transfer will not be complete until this form is received by PIA.

Section One

Name: _____
Last First Middle

E-mail Address: _____

Current Address: _____
Street City State Zip Code

I grant permission for the following information to be released to PIA.

Student Signature: _____ Date: _____

International Student Advisor: The student named above has requested to transfer to PIA. Please complete and return this form by email or fax.

Section Two

Student's Name: _____
Last First Middle

SEVIS Number: _____ Dates of Attendance: From _____ To _____

Is the student currently in status? Yes ___ No ___ Is the SEVIS record currently active? Yes ___ No ___

Comments: _____

Has the student had any academic, financial or other difficulties at your institution? Yes ___ No ___

Please explain: _____

When was the last authorized vacation term? From _____ To _____ SEVIS release date: _____
(Only release upon admission)

Advisor Name: _____ Title: _____

Institution: _____ Telephone #: _____

Address: _____
Street City State Zip Code

Signature: _____ Date: _____

Please return this form by email to info@piaschools.edu.

Upon admission, transfer record out to **PIA Schools Association** – School Code P00214F00546000.