



International Student Transfer-Out Form

First Name Last Name Student ID

Email address Phone Number

Full Name of School You Will Attend

Address of School You Will Attend

Date You Wish to Transfer (mm/dd/yyyy)

Reason for Leaving

I understand that as of the SEVIS release date I will no longer be a RU student, I cannot attend classes, and I cannot work on-campus. I also understand that my new school will print off my new I-20 only after the date listed above.

Signature Date