



International Student Program
3000 Campus Hill Drive
Livermore, CA 94551-7650
Tel: 925.424.1548
Fax: 925.424.1877
Email: cbalero@laspositascollege.edu

TRANSFER INSTRUCTIONS FORM

Please complete this form and submit it to your current International Student Advisor/DSO with a copy of your Las Positas College acceptance letter to request your transfer. Please do not request a transfer until you have received your admission letter from Las Positas College.

Student to complete

1. Student Name: _____
Family (Last) *Given (First)* *Middle*
2. Date of Birth: _____
MM/DD/YYYY
3. SEVIS ID# _____

It is my intention to transfer to Las Positas College. I authorize you to provide Las Positas College with the information requested below.

4. Student Signature: _____
5. Date _____

TRANSFER INSTRUCTIONS FOR SCHOOL OFFICIAL

Please transfer the above student's F-1/M-1 SEVIS record to:

SEVIS Information:

School Code: SFR214F01580000

School Name: Las Positas College

Campus Name: Las Positas College

Las Positas College does not require fellow DSOs to complete and return transfer forms. If the student is inactive status, please release the student's record on the appropriate date.

If the student is **out of status** and will require reinstatement, please contact **Cindy Balero** at cbalero@laspositascollege.edu or 925.424.1548 **BEFORE** transferring record to Las Positas College.