

**HAMILTON COLLEGE**

International Student Services  
Days-Massolo Center  
315-859-4288

**F-1 TRANSFER-IN FORM**

**Section A: To Be Completed By Student Requesting Transfer**

Last/family Name: \_\_\_\_\_ First/given Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Semester and year you will enter Hamilton College: \_\_\_\_\_

Please indicate your travel plans before entering Hamilton:

- Remain in the US (Your Transfer I-20 can be picked up at Hamilton when you arrive)
- Traveling internationally (*Please complete the information below*)  
Please indicate the international address for your Transfer Pending I-20—required for entering the US to attend Hamilton College.

Street: \_\_\_\_\_ City: \_\_\_\_\_

Province/State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

International Phone Number: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Section B: To Be Completed By Transfer-Out School International Office**

Name of Institution: \_\_\_\_\_ City: \_\_\_\_\_

International student advisor at current institution: \_\_\_\_\_

Advisor's email: \_\_\_\_\_ Advisor's phone: \_\_\_\_\_

SEVIS ID: N \_\_\_\_\_ **Transfer Release Date:** \_\_\_\_\_

Is this student in valid F-1 status and eligible for transfer? \_\_\_\_\_

Please indicate any employment authorization or reduced course loads with dates: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Release to Hamilton College, School Code: BUF214F10221000

Please scan and email this form to [odegbam@hamilton.edu](mailto:odegbam@hamilton.edu), or fax to attention of Omobonike Odegbami, 315-859-4077.