F-1 STUDENTTRANSFER NOTICE

To be completed by student

I have decided to begin a full-time program of study at UCEDA. I hereby authorize my current International Student Advisor to provide the information requested below for my transfer to UCEDA.

		Middle Name	Last Name
Data of Binth	First Name		
mn	m/dd/yyyy	EVIS ID NUMBER:	
E-mail:		Phone num	ber:
Expected Program Start D	ate at UCEDA:	mm/dd/yyyy	
	Paterson, NJ - I	NEW214F02020000	Red Bank, NJ - NEW214F02020005
	Passaic, NJ - NE	EW214F02020004	Lakewood, NJ - NEW214F02020007
Please release my record to (check one)	Morristown, NJ	J - NEW214F02020006	Danbury, CT - NEW214F02020009
	Dover, NJ - NEV	V214F02020002	Stamford, CT - NEW214F02020013
	New Brunswick	c, NJ - NEW214F02020003	Silver Spring, MD - NEW214F02020014
	Perth Amboy, N	NJ - NEW214F02020001	Falls Church, VA - NEW214F02020008
Student Signature:			Date:mm/dd/yyyy
To Be C	completed by So	chool Official of Tra	ansfer-out School
			EDA International. Please complete this ord is terminated or unknown, please
		e releasing the record: (866) 8	
explain in comments section	on below and call before	e releasing the record: (866) 8	23-3299. LEASE DATE:
explain in comments section	on below and call before to	e releasing the record: (866) 8	
explain in comments section Dates of Attendance: As of the date of this Trans The student's	on below and call before to sfer Notice: 's SEVIS record is ACTIVE	e releasing the record: (866) 8 SEVIS RE	23-3299. LEASE DATE:
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