

# J-1 Scholar Transfer-Out Request Form

## International Student and Scholar Services

North Decatur Building Suite 130 • Emory University • Atlanta, GA 30322  
Tel: (404) 727-3300 • <http://www.emory.edu/ISSS>



EMORY  
UNIVERSITY

---

### Section A. To be completed by J-1 Scholar

---

Instruction: This form should be completed by J-1 scholars who wish to transfer their J-1 Program sponsorship to another institution from Emory University. Upon completion, email it to [ISSS@emory.edu](mailto:ISSS@emory.edu).

Name as in your passport: \_\_\_\_\_  
Last/Family First/Given

SEVIS ID: \_\_\_\_\_ Date of birth (mm/dd/yyyy): \_\_\_\_\_

Emory e-mail: \_\_\_\_\_ Non-Emory email: \_\_\_\_\_

Have you ever applied for a waiver of the Two-Year Home Residency Requirement?

N/A as I've never been subject to it.  No  Yes (explain the result: \_\_\_\_\_)

I am requesting Emory to release my J-1 SEVIS record to the new J-1 program sponsor named below.

J-1 scholar's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

### Section B. To be completed by new J-1 program international scholar advisor (not Emory)

---

I, as the RO or an ARO, hereby confirm that this J-1 scholar is approved to transfer to:

Name of institution: \_\_\_\_\_

J-1 Program Number: \_\_\_\_\_ Proposed start date (mm/dd/yyyy): \_\_\_\_\_

A/RO name and title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

### Section C. To be completed by current supervisor/department chair at Emory University

---

I confirm that \_\_\_\_\_ agrees with the transfer of the above named J-1 scholar.  
Name of Emory department

Effective date of transfer: \_\_\_\_\_

*Note: On or after this date, the J-1 scholar must stop all activities at Emory University.*

Name of Supervisor/Chair: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_