UAMS HUMAN RESOURCES Office of Immigration Services 4301 West Markham # 564

Little Rock, AR 72205-7199

(501) 686-8132 | Fax (501) 603-1317

Part I: Your Information

https://hr.uams.edu/immigration-services/



J-1 Exchange Visitor Program – Transfer Out Request Form

This form is used to notify Immigration Services Office of your intent to transfer your J-1 status and SEVIS record to another institution. This form is for J-1 Research Scholar or Short-term Scholar.

- By submitting this form, you are requesting Immigration Services Office to transfer your J-1 SEVIS record to a new institution.
- To be eligible for a transfer, you must be maintaining an active J-1 status.
- You must request a transfer BEFORE your DS-2019 Program End Date and your employment last date in UAMS.
- You are responsible to complete the resignation process with your current UAMS department.
- If you decide to cancel your transfer request or other information related to this transfer request, you must notify us **BEFORE** your SEVIS record release date.
- You are required to provide a copy of an official offer letter from your new institution together with this form.

| J-1 Exchange Visitor Full Name | | | |
|--|--------------|------------------|--------|
| Last day of employment in UAMS (mm/dd/yyyy) | | | |
| Have you submitted a resignation to your current UAMS dep | artment? Yes | No | |
| Are you subject to the 212(e) two-year home residency requi | rement? Yes | No | |
| If yes, are you applying for a J-1 waiver or have you received a J-1 waiver approval? | | ıl? Yes | No |
| Part II: Information of Your New Institution | | | |
| New institution Name | | | |
| New institution program number P | | | |
| Requested SEVIS record release date | | | |
| Contact Person (RO/ARO) Name | | | |
| EmailPr | none | | |
| I read the information on this form and fully understand the J Services Office in UAMS to transfer my J-1 SEVIS record as | • | authorize Immigi | ration |
| Signature | Date | | |