



International Academy of English

6302 East Dr. Martin Luther King Junior Blvd. Suite 490

Tampa, FL 33619

Phone: +1 (813) 446-8900

iaetp@sdiae.edu - www.sdiae.edu

TRANSFER FORM

The following student has expressed the desire to transfer to International Academy of English. Please complete this form and return it to us as soon as possible.

Student Name: _____ Date of birth: ____ / ____ / ____

Admissions Number from I-94: _____

Signature of student: _____

First day of Attendance: _____ Last day of Attendance: _____

Check all applicable:

_____ This student has maintained full-time status and is eligible to transfer
_____ This student is out of status and has **not** filed for reinstatement
_____ Other (please clarify in comments section)

Has this student cleared all financial obligations to your institution? Yes ☐ No ☐

Has this student been in the SEVIS system? No ☐ Yes ☐ SEVIS Nr. _____
Release date: _____

***If this student has a SEVIS I-20, please Transfer-Out this student with a release date to
International Academy of English- Tampa (Code:PHO214F12028001)
Thank you.***

Comments _____

Name and address of school _____

School telephone: _____

Fax: _____

Signature of DSO: _____

Date: _____

Name and Title: _____

_____ 214F _____
(INS School File Number)

Please return this form to: iaetp@sdiae.edu