

## I-20 TRANSFER FORM: CLA SAN FRANCISCO

All F-1 students must complete an I-20 Transfer Form when transferring to another school. Once completed, please mail or email this form to:

**Mail:**

California Language Academy  
312 Sutter Street #402  
San Francisco, CA 94108

**Email:**

info@cla.edu

### CLA CODE: LOS214F53727002

**STEP 01:** Complete the student information below to authorize the release of information from your current school.

*"I authorize you to send the information requested in STEP 02 to California Language Academy".*

Student Last Name:

Student First Name:

Local Address:

State:

City:

Province:

Postal Code:

Start Date at California Language Academy (mm/dd/yyyy):

Student's Signature \_\_\_\_\_

Date (mm/dd/yyyy):

**STEP 02:** Give this form to your current school's Designated School Official (DSO).

- |  |     |    |
|--|-----|----|
| 1. To the best of your knowledge, is the student currently in legal status and eligible to transfer? | Yes | No |
| 2. How long has the student been enrolled at your institution (mm/dd/yyyy)? From:                    | To: |    |

Student SEVIS ID:

SEVIS Release Date (mm/dd/yyyy):

Name of School:

City:

Name of (P)DSO:

Phone:

Email:

(P)DSO Signature: \_\_\_\_\_

Date (mm/dd/yyyy):