

## Transfer Out Request Intake Form

- Scholar last name: \_\_\_\_\_
- Scholar first name: \_\_\_\_\_
- Scholar date of birth (MM/DD/YYYY): \_\_\_\_\_

### Fill out this form to assist your hiring unit when they are initiating your Transfer Out Request.

1. Scholar advisor name: \_\_\_\_\_
2. Scholar advisor email: \_\_\_\_\_

The scholar advisor is your contact with the international office at your new school. This is not your host PI at the new institution.

3. Effective date of transfer: \_\_\_\_\_

This is the first day you will be working at the new sponsor. There cannot be a gap between your UW-Madison program and your start date with the new institution. Your start date with the new sponsor should start the day after your last day with UW-Madison. The effective date of transfer must happen on or before your DS-2019 end date.

4. Program sponsor number: \_\_\_\_\_

You will need to get this from your scholar advisor at your new institution.

5. Transfer Institution/Program Sponsor name: \_\_\_\_\_

6. Transfer program field of specialization: \_\_\_\_\_

This should match what you are researching at UW-Madison. See your DS-2019 for your field of specialization.

7. Have you applied for or received a waiver of the 2-year home residency requirement? \_\_\_ Yes \_\_\_ No

If your new sponsor has a transfer in form, please email it to your hiring unit along with this completed form. The hiring unit will work with IFSS to complete your new sponsor's transfer in form.