

Inter-Department Transfer Request Form

J-1 Exchange Visitors may be authorized to change departments as long as there are no major changes in the EV's initial research objectives at UCLA. The prospective academic department must submit this form along with one letter of support. The letter should address that there are no major changes in the EV's initial research objective. By signing below, both current and prospective faculty supervisors are in full support of the transfer.

Exchange Visitor Information

Exchange Visitor Last Name (as it appears on DS-2019 form)	
Exchange Visitor First Name (as it appears on DS-2019 form)	
SEVIS # (located on your DS-2019 form)	
Email Address	
Primary Phone Number	

Program Information

Current UCLA Department Name	
Desired Date of Transfer	
Current Appointment Start Date	
Current Appointment End Date	

Current UCLA Faculty Supervisor

Name	
Email	
Signature	
Date	

Prospective Academic Department Information

UCLA Department Name	
Address	
City	
State	
Zip code	
Prospective UCLA Faculty Member Name	
Prospective UCLA Faculty Member Title	
Prospective UCLA Faculty Member Email	
Prospective UCLA Faculty Member Signature	