

FAMU Office originating request:
<input type="checkbox"/> Graduate School
<input type="checkbox"/> FAMU admissions

Office of International Education and Development (OIED)
 Florida A&M University
**STATUS VERIFICATION FORM FOR
 INTERNATIONAL STUDENT AND SCHOLAR ADMISSION**

Phone: (850) 599-3295/3562
 Fax: (850) 561-2520
 Email: famuoied@famuedu.edu
 FAMU Web: www.famuedu.edu
 OIED Web: famuoied.org

If you are in **F, J status or in any other immigration status**, please complete this form and submit copies of your immigration documents indicating that you are currently in status. If you are **F-2, J-2, H-4 or other dependent status**, have this form completed for the F-1, J-1, H-1, etc. ANYONE within the US transferring to Florida A&M University in student status must complete this form.

PRINTED NAME: _____ SID No: _____
 Current Visa Type: _____ Birth date: mm ___/dd ___/yyyy _____

If not in F-1 or J-1 status, do you intend to CHANGE STATUS to F-1 or J-1

SEVIS ID Number: _____
 OTHER Immigration ID Number: _____

NUMBER OF Accompanying dependents:
 Spouse YES NO
 Children - (how many) _____

US Institutions attended (list in order of attendance starting with most recent)	Visa Status	Date(s) of attendance	
		From	To

Are you currently a Florida A&M University student? YES NO

If yes, what is your Visa type? _____ (Attach a copy of your Visa page)

Attach copies of all 1-20, DS-2019 or other immigration documents issued to you for study/work/etc. at the above-named institutions and **PROOF** that you are maintaining that status. I authorize my present International Advisor to provide the information below:

STUDENT/SCHOLAR Signature: _____ Email address: _____ Date _____

For F and J status students: This section must be completed by the International Advisor of the program the student is transferring out of:

<input type="checkbox"/>	The student is in good standing and is maintaining their F-1 status.	<input type="checkbox"/>	This student reported in and is considered to be in compliance with DHS BCIS/BICE requirements and in status.
<input type="checkbox"/>	The student has not been pursuing a full course of study.	<input type="checkbox"/>	The student is out-of-status.
<input type="checkbox"/>	Other (please comment)		

Last day student attended classes at your school/program (dd/mm/yyyy) _____

If this student is transferring after reporting to FAMU, what date did the student report in and complete requirements for your institution/program: _____

Please indicate any instances of academic(A T)/curricular(CPT) or optional practical training (OPT) that this individual may have had:.

Date From	To	<input type="checkbox"/> OPT	<input type="checkbox"/> CPT	<input type="checkbox"/> AT
Date From	To	<input type="checkbox"/> OPT	<input type="checkbox"/> CFT	<input type="checkbox"/> AT

STUDENT SEVIS ID NUMBER: _____ SEVIS RELEASE DATE: _____

ATTACH COPIES OF I-20/DS-2019's IMMIGRATION DOCUMENTS- INCLUDING ANY REINSTATEMENT OR OTHER DOCUMENTS.

Please certify the preceding information is accurate by signing below.

Signature of School Official _____ Date _____ Printed Name _____ Title _____

Name of Institution			
City, State and Zip Code			
Telephone Number	Fax	Email:	Date form completed:

Information can be faxed to (850/599-3295); however, mail or bring the ORIGINAL to: Director of International Students and Scholars Services, Office of International Education and Development, 302 N. Perry-Paige Building, Florida A&M University, Tallahassee, FL 32307. Contact the Director at agnes.coppin@famuedu.edu or 850/599-3295/3562.