Shoreline Community College
F-1 Transfer Status Verification Form

Please complete the first section of this form and ask the advisor at your current school to complete the second section and then send it to Shoreline Community College International Admissions by email international@shoreline.edu or by fax 206-546-7854. The purpose of this form is to provide us information about your F-1 status and SEVIS record, and this form is a part of Shoreline’s application for F-1 students at another U.S. school. This form does not ask for the electronic release of your SEVIS record from your current school to Shoreline. Your SEVIS record should only be electronically released AFTER you have received admission from us.

To be completed by the student

<table>
<thead>
<tr>
<th>Passport last name</th>
<th>Passport first name</th>
<th>Middle name (if any)</th>
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<table>
<thead>
<tr>
<th>Student ID number (at current school)</th>
<th>Student SEVIS ID number</th>
<th>Date of birth (mm/dd/yy)</th>
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Last quarter/semester/session attended: ________________________

Email: ________________________

Do you plan to travel outside of the U.S. before beginning your studies at Shoreline Community College?  
Yes ☐  No ☐

By signing below, I authorize a school official at my current school to provide Shoreline Community College with the information below.

Signature of student (required) ________________________ Date ________________________

To be completed by an International Student Advisor / DSO

<table>
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<tr>
<th>Name of DSO</th>
<th>Title</th>
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<tr>
<th>Name of institution</th>
<th>City</th>
<th>State</th>
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Phone: ________________________ Email: ________________________

To the best of my knowledge, the above name student is

Enrolled full time at this school in the session:  
Yes ☐  No because ________________________

In status with respect to immigration regulations:  
Yes ☐  No, out of status because ________________________

Eligible to continue at our school:  
Yes ☐  No because ________________________

Is currently placed on academic probation:  
Yes ☐  No ☐  N/A

Previously authorized reduced course load (reason): ________________________

Last authorized vacation quarter: ________________________

Previously approved OPT/CPT (if any): ________________________

Date of attendance at your school:  From (mm/dd/yy) ________________________ To (mm/dd/yy) ________________________

To the best of my knowledge, the student’s SEVIS record will be released in Active status with confirmation of acceptance.

Yes ☐  No because ________________________

Additional comment (e.g. attendance issue): ________________________

Signature of DSO (required) ________________________ Date ________________________

Please only release Active SEVIS record with confirmation of acceptance. (SEA214F00184000) international@shoreline.edu