

Office of International Affairs (OIA)

REQUIRED INFORMATION FOR APPLICANTS NOW IN THE UNITED STATES ON NONIMMIGRANT VISAS

INSTRUCTIONS TO APPLICANTS IN THE U.S.: All students should complete Section A of this form. You should request the International Student Advisor or Counselor at the school you currently attend or most recently attended to complete Section B. You will not be issued an I-20 from WVSU until this form is completed and returned with the documents requested.

In order for WVSU to provide you an I-20, you will need to request your current school's International Advisor to release your SEVIS record to West Virginia State University. Once you are issued an I-20 from WVSU, you must report to the OIA within 15 days of the beginning of classes to have your transfer processed. If you are not an F-1 or J-1 visa holder, complete Section A only and return the form with the required documentation. All forms should be sent to the address indicated on this form.

SECTION A: INFORMATION FURNISHED BY THE STUDENT

FULL NAME				
	(Family or surname)	(First or give	ven name)	(Middle name)
COUNTRY	NTRY COUNTRY OF			
OF BIRTH		CITIZENSHIP		
SEMESTER	OF INTENDED	MAJOR FI	ELD	DEGREE
ENROLLME	NT AT WVSU:	OF STUDY	7	SOUGHT
MOST RECENT U.S. INSTITUTION ATTENDED			DATE OF ATTENDENCE	
			From	to
(Name of Inst	itution)			

Place an X next to the visa classification you now hold and attach copies of the documents requested.

F-1 student: Attach copies of your I-94 and all 1-20's issued to you.

_____ J-1 student: Attach copies of your I-94 and all IAP-66's issued to you.

_____ Other: Please specify and attach all copies of immigration documentation.

I HEREBY AUTHORIZE THE FOREIGN STUDENT ADVISOR AT THE US INSTITUTION I HAVE MOST RECENTLY ATTENDED TO REVIEW THE INFORMATION PROVIDED ABOVE AND ON THE ATTACHED PHOTOCOPIED DOCUMENT(S) AND TO PROVIDE THE ADDITIONAL COMMENTS REQUESTED IN PART B OF THIS FORM.

Student Signature	Date

SECTION B:

INSTRUCTIONS TO THE PDSO/DSO AT THE INSTITUTION CURRENTLY OR MOST RECENTLY ATTENDED BY THE STUDENT. Before filling out Section B, please review the information the applicant has provided in Section A against the records maintained in your office. Please answer the following questions and return the completed form to the address given at the bottom of this page. Thank you.					
1. Is the information in Section A (including photocopies of certificates of eligibility) complete and accurate according to records in your office? YES NO					
(If NO, please comment)					
2. Please indicate the date the SEVIS record will be transfer	rred to WVSU:				
3. To the best of your knowledge, is this student currently in status? YES NO					
4. Has the student ever been reinstated to status?; If	yes. Please indicate the date the				
reinstatement was approved:					
5. If the applicant is in F-1 status, please indicate (from you	r records) his/her:				
First day of F-1 status SEVIS Nu	mber				
Dates attended at your institution: From	То				
Practical Training authorized by your institution (Please ind	licate type and specific dates):				
6. If the applicant is in J-1 status, please indicate (from your	r records) his/her:				
First day of J-1 status SEVIS Nu	mber				
Name of Program Sponsor					
Academic Training Authorized (Specify Dates)					
Certifying Official Name and Title:					
Institution: Signatu	rre Date				
Address					
Email:Tele					
PLEASE RETURN THIS FORM AND ATTACHMENTS TO:	international@wvstateu.edu Office of International Affairs West Virginia State University 304 Ferrell Hall P O. Box 1000 Institute, WV 25112 Phone: (304) 204-4094				