



INTERNATIONAL STUDENT VERIFICATION FORM

PART A

PLEASE PRINT CLEARLY

Family Name / Last Name (As it appears on your passport)

First Name (As it appears on your passport)

Middle Name (As it appears on your passport)

ADDRESS IN THE US

Street:

Street:

City:

State/Province:

Zip Code:

Phone Number:

PART B

Do you currently have an F-1 visa?

- Yes- Attach copy of your F-1 visa and all 3 pages of your I-20 and go to question 2
- No- You may skip section C and proceed to Section D

Are you currently in the United States?

- Yes- Attach a copy of your I-94 (front and backside) and go to Question 3
- No-Go to Question 3

Are you taking classes in the United States or have you taken classes within the last 5 months and are transferring to CNM?

- Yes- Complete section C
- No- Skip section C and proceed to section D

PART C

I _____ (student's name) intend to leave my current US institution and begin study at Central New Mexico Community College. I grant permission for the release of the information requested below.

Student Signature and Date:

Please keep in mind that your SEVIS record needs to be released to CNM within 60 days of your last date of attendance at your previous school. Emailed copies are acceptable.



This section to be completed by the Designated School Official at student's current/previous institution.

Student name:
The above mentioned student has applied for admission to CNM. Please complete the following information and forward it by email or mail to CNM at: Central New Mexico Community College Global Education Office 525 Buena Vista Dr. SE Albuquerque, NM 87106 GlobalEducation@cnm.edu 505.224.5211
Current/ previous Institution Name:
Phone Number:
SEVIS ID Number:
Student's most recent enrollment term:
Please check all that apply:
<input type="checkbox"/> The above mentioned student has maintained status and is eligible for transfer.
<input type="checkbox"/> This student is/ was on OPT.
Period indicated on EAD card: _____ to _____
<input type="checkbox"/> This student is out of status or has a SEVIS record in Completed or Terminated status.
<input type="checkbox"/> If the student desired to stay at your institution, would this student be allowed to continue?
SEVIS Release Date:
DSO Name (please print):
DSO Signature and Date:

PART D

<input type="checkbox"/> I currently do not have and F-1 visa.
I certify that the information on this form is true, correct, and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.
Print Name:
Student Signature and Date: