

**Current F-1 Students complete this section, then give to the designated school official at your current college**

Print Name \_\_\_\_\_

Birthdate \_\_\_\_\_

I authorize the designated school official at \_\_\_\_\_  
current or most recent college or university  
 to provide the information requested below.

\_\_\_\_\_  
 student's signature \_\_\_\_\_  
date

**Instructions for the designated school official:**

1. Please complete items A, B, C, and D below.
2. Mail or FAX to:

Admissions Department  
 Academy College  
 1101 E 78th St, Ste 100  
 Bloomington, MN 55420  
 FAX: (952) 851-0094

Student's SEVIS ID Number: \_\_\_\_\_

- A. The above named student:
- is enrolled full-time at this school. Year \_\_\_\_\_ Term \_\_\_\_\_
  - is enrolled less than full-time at this school because: \_\_\_\_\_.
  - has completed their program of study at this school on (date) \_\_\_\_\_.
  - did not complete their program of study. Last known date of attendance was: \_\_\_\_\_
  - never reported to this school as per I-20 issued to student.

- B. To the best of my knowledge the above named student is:
- in status with respect to Immigration regulations
  - out of status with respect to Immigration regulations because: \_\_\_\_\_  
and
  - a reinstatement to student status is pending
  - student has been advised that a reinstatement will be required by the new school

- C. Has the above named student met all financial obligations to your institution?  yes  no  
 if no, please explain:

D. \_\_\_\_\_  
Name of school city, state, zip phone

\_\_\_\_\_  
 Name and Title of person completing form signature date