TO: ALL INTERNATIONAL APPLICANTS IN THE UNITED STATES
As part of the application process to Saint Leo University you must show that you are currently in status with immigration by submitting this form to Saint Leo University, Admission-MC2008, PO Box 6665, Saint Leo, FL 33574. If you are a permanent resident (Immigrant) of the U.S., and hold a permanent resident card or Form I-551, please fill out only the box marked Perm. Res. (Immigrant) yourself and return it [with a copy of your Alien Registration Card].

The current school code for Saint Leo University – University Campus is: MIA214F00102000
Fax # is: (352) 588-8256 – Admission or (352) 588-6530 – Campus Life; (352) 588-8283 – Admission Office Phone

SECTION I – TO BE COMPLETED BY STUDENT:
I request and authorize my present international student advisor (or equivalent Campus officer) to provide the information below as part of my application for admission to Saint Leo University.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Social Security Number</th>
<th>Expected Saint Leo University Entry Date</th>
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Student’s Name
Family
Given
County of Citizenship

Present Address
Street and Apartment Number
City
State
Zip Code

SECTION II – TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR:

VISA INFORMATION: If none of the following apply indicate visa type here:

- [ ] F-1
  - I-20 ID Admission No. (I-94 Card#)
- [ ] J-1
  - Sponsor________________________
  - Program No.____________________
  - Please attach copy of recent DS 2019.
- [ ] Perm. Res. (Immigrant)
  - Alien Registration No.
  - Attach a copy of your Alien Registration Card. No certificate of Financial Responsibility is required of a Permanent Resident.

SEVIS ID # ______________________________________________________________________________________________________

What date will you transfer student in SEVIS to Saint Leo University? _______________________________________________________

Date of initial entry into the United States: _______________________________________________________

Type of visa held at entry: _______________________________________________________

What is the expiration date on the student’s I-94 card? __________________________ D/S _____ other date______________

For which term was the student last enrolled full-time at your institution? _______________________________________________________

To the best of your knowledge, is the student currently “in status” with USCIS? Yes ___ No ___. If no, please explain:

____________________________________________________________________________________________________________________________________________________

Has the student ever been granted any kind of practical training? Yes ___ No ___

If yes, state kind and duration: _______________________________________________________

I hereby certify the preceding information to be correct:

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<tr>
<th>Signature of School Official</th>
<th>Printed Name</th>
<th>Title</th>
<th>Phone</th>
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Name and address of Institution
City
State
Zip

THIS FORM MUST BE RETURNED BEFORE FINAL ACTION CAN BE TAKEN ON APPLICATION