

Complete this form ONLY if yo	u are currently attending	g a school in the USA.	
To the Student			
This form is to be completed by you last attended.	y the international stude	nt advisor of the school yo	ou are presently attending or of the school
l hereby authorize my present i Santa Barbara City College.	nternational student adv	risor to provide the informa	ation below as part of my application to
Student's Signature		Date _	
To Be Completed by an Int Santa Barbara City College is		Advisor	vistrict (LOS 214F 00359.000).
Student Applying for Admi	ssion to Santa Barb	ara City College	
Last Name		First Name	
Student SEVIS Number		(Do not release SEVIS reco	rd until confirmation of acceptance)
Name of School			
Anticipated final date of attend	ance		
Did student maintain legal full-t	ime F-1 status? ☐ Yes	□ No	
f not, comment			

For Language Schools Only	V		
What is student's attendance r		%	
What is student s attendance i	ecord !	90	
DSO/Advisor's phone number			
DSO/Advisor's email address			
JOO/Advisor's email address			
			305
Advisor's Signature	Name		Date
31/1	cation documents a	nd e-mail to: intlapp(pipeline.sbcc.edu
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