

SEVIS RECORD RELEASE FORM

Please Release My SEVIS Record to Monroe College • SEVIS CODE: NYC214F00936001

| | TO BE COMPLETED BY YOU, TH | E STUDENT |
|--|--|--|
| | | |
| First Name | Last Name | Monroe ID # |
| Physical Address in the U.S. (I | Building number, street name, apartment/floo | r/suite number, city, state, and zip) |
| Email Address | U.S. Cell Phone | Number |
| SEVIS ID Number (top left co | rner of I-20): N | |
| | been accepted to attend Monroe College? Che 20 Spring 20 | eck one & add the year. |
| | ill end immediately upon the release of you do to Monroe College on this date: :// | |
| | egulations you must complete the transfer pro- o so will deactivate your SEVIS (I-20) record and | cess within 15 days of the program start date at d you will no longer have valid student status. |
| Student Signature | | Date |
| | | |
| TO BE COM | PLETED BY AN INTERNATIONAL ADVISOI | r at your *current school* |
| Once completed please emai | I this form to phperoune@monroecollege.ed | du. |
| School Name: | | |
| Dates of attendance at your s | chool: Start Date: / / La | st Attended:/// |
| Student has been enrolled in | a full-time course of study and is in valid F-1 sta | atus. |
| • | OPT. OPT authorization period: | |
| | I financial obligations to your school? Yes | |
| If the student is not in v | ralid F-1 status please indicate current status: | |
| Comments: | | |
| SEVIS release date for the abo | ove-named student: : / | , |
| Advisor Name | Advisor Signature | Date |
| Advisor Email Address | Advisor Phone N | Number |