

UNIVERSITY AT ALBANY

State University of New York

INTERNATIONAL STUDENT SEVIS FORM

In accordance with SEVIS regulations, this form must be completed and returned to us before documents can be issued.

Part A- Student

You must complete Part A and bring this form to the International Office of your current institution.

1. Name (print) _____
2. Date of Birth _____
3. Country of Birth _____
4. Country of Citizenship _____
5. Email _____
6. Semester you wish to begin your study at Albany _____

Part B- International Student Advisor

To the International Student Advisor: Please complete Part B and send the form to us.

7. Name of Institution _____
8. Advisor's Name and Title _____
9. Mailing Address _____
10. Phone _____
11. Fax _____
12. Email _____
13. Dates of Student's enrollment: From _____ to _____
14. SEVIS ID # _____
15. Release Date _____
16. Student's non-immigrant status: _____ F-1 _____ J-1 _____ Other (specify)
If J-1, Program Number _____ Sponsor _____
17. To the best of your knowledge, is the above student in status with Homeland Security? _____ Yes _____ No

Comments:

Signature _____ Date _____

UNIVERSITY AT ALBANY • OFFICE OF INTERNATIONAL ADMISSIONS AND RECRUITMENT

Science Library G 40, 1400 Washington Ave.

PH: (518) 591-8172 • FAX: (518) 591-8171 • EMAIL: uginternational@albany.edu • albany.edu/international-admissions