

## International Student Services SEVIS VERIFICATION FORM

**To the Applicant:** All international students in Student (F-1) Status who are transferring from other U.S. institutions are required to submit a proof of eligibility to transfer. Please fill out the information below and give this form to the International Advisor (PDSO/DSO) where you are currently enrolled or last attended.

STEP 1 Applica	int Completes				
Applicant's Name	Surname	Given Name			
Current U.S Address	Street	City	Postal Code	Telephone	
Foreign Address for I-2	0 Shipping Purposes				
Address:		City:	Province/Terrin	ory:	
Postal Code:	(	Country:		Telephone:	
Intended Program of St		, ,	,		
By signing below, you grant	permission to your currer	nt institution PDSO/DSO to p	provide the requested inform	ntion to Hope College.	
Student Signature		Date			
STEP 2 Interna	itional Advisor (Pl	OSO/DSO) Complete	s		
Has the student been If "Yes," please indicat		e- or post-completion ( To:	Optional Practical Train	ning? No Yes	
Is the student currently If "No," please explain	y <b>IN STATUS</b> with <b>S</b>	EVIS?	] Yes		
			letter from Hope Colleg	ge	
		VIS record: <b>DET214F00329</b> 0 pould be transferred to: <b>P-1-0</b>			
Name of DSO (printed)		DSO Email		DSO Phone	
Signature of DSO		Date:			

Please Return To: intladvisor@hope.edu