



ISAF—INTERNATIONAL STUDENT ADVISOR'S FORM

FOR STUDENTS CURRENTLY STUDYING IN THE UNITED STATES

OFFICE OF ADMISSIONS

505 Ramapo Valley Road, Mahwah, NJ 07430-1680

Tel: (010) 201.684.7300, 7301; Fax: (010) 201.684.7964; Web site: www.ramapo.edu

TO THE STUDENT

You must have this form completed if you have an F-1 or J-1 visa and are currently studying in the United States. Please take this form to either the International School Advisor or an appropriate school official who will complete the form and return it to the Ramapo College Office of Admissions. This form must also be completed if you are attending a high school in the United States. Have copies of your I-20 or DS-2019 submitted with this form. Please include copies of your dependent's I-20 or DS-2019.

Student's authorization

Name of Student *(please print)*

Date of Birth

Signature

Date

TO THE INTERNATIONAL STUDENT ADVISOR OR DESIGNATED SCHOOL OFFICIAL

The student whose name appears on this form has applied for admission to Ramapo College. Part of the admission process is the submission of this form. Your assistance in providing this information in a timely manner is appreciated.

Please check the square which most accurately describes your institution:

Language School

Private Secondary School

Four-Year College/University

Public Secondary School

Two-Year College

If a public secondary school, has the student paid tuition fees to the school district?

Yes

No

Has the student ever been on disciplinary probation or dismissed for disciplinary reasons?

Yes

No

If yes, briefly describe the nature of the offense and indicate the date: _____

Please give dates of optional practical training: _____

Please give dates of curricular practical training: _____

Has the student satisfied financial obligations to the school? Yes No

Has the student consistently maintained his/her visa status? Yes No If no, please explain.

Has the student received permission to enroll for less than full-time studies? Yes No If yes, please give semesters and reason: _____

CERTIFICATION OF INTERNATIONAL STUDENT ADVISOR OR DESIGNATED SCHOOL OFFICIAL

SEVIS ID Number

Name *(please print)*

Title

Institution

Telephone Number

Signature

Date