



FULLERTON C O L L E G E

International Student Center

321 East Chapman Avenue

Fullerton, CA 92832-2095

tel: 714.992.7078

fax: 714.992.9927

email:isc@fullcoll.edu

F-2 STATUS VERIFICATION

Section A: to be completed by the Fullerton College applicant with F-2 status

Please complete this section and then give this form to the school official/ advisor of your parent or spouse.

Applicant's Name: _____
Last First Middle

Date of Birth: ____/____/____ Email: _____

Passport Country: _____ Phone Number: _____

Applicant's Signature

Date (MM/DD/YYYY)

Section B: to be completed by F-1 student's International Advisor/DSO

The above named applicant in Section A is an F-2 dependent of the F-1 student who is currently attending your school. The dependent is applying for admission to Fullerton College. In compliance with USCIS regulations, we request your confirmation of the F-1 visa student's status at your institution to help us determine if the applicant with F-2 dependent status is eligible for admission to Fullerton College. Please complete this section and return to the International Student Center via fax or e-mail.

F-1 Student's Name: _____
Last First Middle

Name of Institution: _____

Institution Address

City

State

Zip Code

Phone Number

Fax Number

E-mail Address

Dates of attendance: _____

Specify the type of program: High School Language School College/University Other: _____

The F-1 student is **in status** and is/has been pursuing a full-course of study and is eligible to transfer.

The F-1 student is **out of status**. Please explain:

PDSO/DSO Name

Title

PDSO/DSO Signature

Date