



UCLA EXTENSION
INTERNATIONAL STUDENT OFFICE
10995 LE CONTE AVENUE, SUITE 113
LOS ANGELES, CALIFORNIA 90024
(310) 825-9351 • FAX: (310) 267-2088

STATUS VERIFICATION

FOR F-1 VISA STUDENTS TRANSFERRING TO UCLA EXTENSION
SEVIS School Name: **UCLA-Extension** School Code: **LOS214F02095000**

All applicants currently in the U.S. with a valid I-20 and F-1 visa applying to UCLA Extension’s certificate programs must present this form to the international student advisor (DSO) of your current or previous school for completion.

Family Name: _____ First Name: _____ Middle Initial: _____

Date of Birth: ____/____/____ Citizenship: _____ SEVIS ID: _____

Certificate program to study at UCLA Extension: _____

- The above-named student enrolled full-time, has maintained F-1 status and is eligible to transfer.

The student's dates of attendance: From ____/____/____ to ____/____/____ .

The student's OPT dates: From ____/____/____ to ____/____/____ .

PLEASE DO NOT RELEASE SEVIS RECORD UNTIL AN ACCEPTANCE LETTER IS ISSUED.

- The student is out of status or SEVIS record was “Terminated” or “Completed”.

Additional Comments: _____

School Name: _____

Name of DSO: _____ Signature: _____ Date: _____

Phone: _____ Fax: _____ Email: _____