



Visa Clearance Form for International Students

THIS FORM IS TO BE COMPLETED BY TRANSFER STUDENTS ONLY

SECTION I

To be completed by applicant (I request and authorize my personal International Student Advisor to provide the information below as part of my application to Piedmont Community College)

Last Name:		First Name:	
Address:			
City:	State:	Zip:	
County of Citizenship:		Date of Intended Enrollment:	

SECTION II

To be completed by International Student Advisor at current school. Please return this form to Piedmont Community College, Admissions, PO BOX 1197, Roxboro NC 27573 or email to admissions@piedmontcc.edu

Student's initial date of entry to U.S.:
Admission number:
Program level/time limit the student has most recently been authorized to pursue:
Has this student requested and/or been authorized to accept off-campus employment? <input type="checkbox"/> Yes <input type="checkbox"/> No (please explain)
Is this student currently attending the school s/he was last authorized to attend?
To the best of your knowledge, has this student maintained legal F-1 status?
Additional comments:

Signature:		Date:	
Name and Title of School Official:			
Name of School			
Address of School:			
City:	State:	Zip:	Phone Number: