

HIGH POINT UNIVERSITY
Norcross Graduate School

Visa Clearance Form

Part B – To Be Completed by Current Designated School Official or Responsible Officer

For F-1 Student: Before completing this section, please compare information provided in Part B and the attached documents with the record maintained in your office. Please answer the following questions, sign, and return the completed form to the applicant.

1. Is the student currently attending the school he/she was authorized to attend? ____ Yes ____ No
If no, please explain: _____

2. Degree-level that the student has been authorized to pursue: _____
3. To the best of your knowledge, is this student currently in lawful F-1 status? ____ Yes ____ No
If no, please explain: _____

4. Has the applicant been authorized practical training while attending your institution? ____ Yes ____ No
If yes, please indicate CPT/OPT, months used, and whether full-time or part-time. If he/she has more than one CPT/OPT done, please provide information on each on a separate sheet.

CPT or OPT	Duration (months)	Dates of Authorization	Full or Part-Time

5. SEVIS Information:
SEVIS Number: N _____
Expiration of Current I-20 (MM/DD/YYYY): _____
When is the SEVIS release date? ____/____/_____

For J-1 Exchange Visitor: Before completing this section, please compare information provided in Part B and the attached documents with the record maintained in your office. Please answer the following questions, sign, and return the completed form to the applicant.

1. Name and Address of Sponsor: _____

2. Is the applicant in lawful J-1 status? ____ Yes ____ No Please explain: _____

3. Please indicate the applicant’s academic training, time used, and date of authorization.

Training	Duration (months)	Dates of Authorization

4. Is the applicant subject to the two-year residency requirement? ____ Yes ____ No

Name and Title of P/DSO or RO/ARO: _____

Name and Address of Institution: _____

Phone: _____ **Fax:** _____ **Email:** _____

Signature: _____ **Date:** ____/____/_____