

University of San Francisco Visiting International Student Request Form

This form is to be completed by those who wish to enroll at USF as a visiting student and are not citizens or permanent residents of the United States. Applicants on a Student Visa (F-1 or J-1) will need to complete Parts A and B, and have the international student office where they are attending full-time complete Part C. Applicants in a non-student J-1 category (Au Pair, Camp Counselor, etc.) will need to complete Part A and include a copy of their DS-2019. Visiting students in other visa categories only need to complete Part A.

Instructions:

1. Complete form as needed for your visa category.
2. Scan your passport bio page along with this form and e-mail to: visitingstudents@usfca.edu
3. Non-Student J-1 applicants should also send a copy of their DS-2019 to the email address above.

Part A: To be Completed by the Student (All Visa Holders)		
First Name:	Family Name:	
Local Phone Number:	Email Address:	Date of Birth (mm/dd/yyyy):
During which term(s) will you be enrolled at USF (please check all that apply, include year): <input type="checkbox"/> Fall ____ <input type="checkbox"/> Spring ____ <input type="checkbox"/> Summer ____		What is your current visa status in the United States:

Part B: To be Completed by the Student (F1 or J1 Visa Holders Only)	
Please indicate your enrollment status for the term(s) listed above:	
<input type="checkbox"/> I will maintain a full course of study at my current institution (the institution indicated on my current Form I-20 or Form DS-2019). My credits at USF will be in addition to the full course of study requirements at my current institution.	
<input type="checkbox"/> The credits I take at USF will transfer back to my current institution. My credits at my current institution plus the credits I will complete at USF will enable me to meet my current institution's full course of study requirements for F-1 students or J-1 exchange visitors.	
<input type="checkbox"/> I will be enrolled at USF in the summer term, and I am not required to be enrolled at my current institution during the summer.	
<input type="checkbox"/> Other (please specify):	
Name of current institution:	
I understand the conditions of my F-1/ J-1 nonimmigrant visa status and that I am required to maintain a full course of study, as defined by the institution listed on my Form I-20/DS-2019, during my period of study at USF.	
_____ Student Signature	_____ Date

Part C: To be Completed by an International Student Advisor/DSO/RO at Your Current Institution (F1 or J1 Visa Holders Only)

The above named student is a current student at (Name of Institution):		Student SEVIS ID:
Expected program end date (mm/dd/yyyy):	Term(s) expected to enroll at USF (please check all that apply and indicate term year): <input type="checkbox"/> Fall _____ <input type="checkbox"/> Winter _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Summer _____	
Address of current institution:		
By signing this form I confirm that, to the best of my knowledge, the above student is in valid _____ F-1 or J-1 nonimmigrant visa status, that he/she is maintaining a full course of study through _____, Name of Institution and is eligible to enroll part-time at the Univeristy of San Francisco (USF).		
Advisor's name:	Title:	
Email:	Phone Number:	
_____ Advisor Signature		_____ Date

This form should be scanned, along with a copy of the student's passport bio page, and emailed to: visitingstudents@usfca.edu