

\_\_\_\_\_, grant permission for the information requested below to be  
(Print name)  
forwarded to the University of Louisiana at Lafayette.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address in Your Home Country: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ mail: \_\_\_\_\_

Please Note: If you are traveling outside the U.S. prior to enrolling at Lafayette, you will need the new SEVIS ID to reenter the U.S. Please indicate how you would like to receive your SEVIS ID:

- \_\_\_\_\_ Prepaid FedEx, DHL, or UPS envelope I will pay for the courier service (Suggested)
- \_\_\_\_\_ Regular mail sent to the U.S. address listed on my application (If lost in mail, a new SEVIS ID will not be issued until 30 days after the date of the first one issued.)
- \_\_\_\_\_ I will obtain the SEVIS ID during orientation

Phone: (-)283.4283.49 Fax: (-)283.4283.49 Email: OL214F001890

00).

1. Date of enrollment: \_\_\_\_\_
2. Is this student in lawful immigration status? Yes \_\_\_\_\_ No \_\_\_\_\_
3. Has this student met all financial obligations to your school? Yes \_\_\_\_\_ No \_\_\_\_\_
4. SEVIS transfer release date \_\_\_\_\_ (DSO Release date must be entered for SEVIS ID to be transferred.)
5. SEVIS ID number: \_\_\_\_\_

Advisor Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Telephone \_\_\_\_\_

School Code \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_