



St. Mary's School  
1865

**Part 1: To be completed by the applicant**

Please complete Part 1 of this form and give it to your current International Student Advisor to complete Part 2.

I authorize my present International Student Advisor to provide the information below.

Student's Signautre: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name (last): \_\_\_\_\_ (first): \_\_\_\_\_

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**Part 2: To be completed by the International Student Advisor**

The above named student has applied to St. Mary's. **St. Mary's School Code: P00214F00027000**  
Please answer the following questions below and return this form to:

Director of Admission  
St. Mary's School  
816 Black Oak Drive  
Medford, OR 97504

Phone: 541.773.7877 ext. 3108  
Fax: 541.772.8973

Student SEVIS ID #: \_\_\_\_\_

1. The student pursued a full course of study the last semester at our institution: Yes No
2. What were the student's dates of attendance? \_\_\_\_\_
3. The student is eligible to transfer to St. Mary's: Yes No  
**RTI Release Date:** \_\_\_\_\_

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**I certify that the preceding is correct.**

Signature of School Official: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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