Metropolitan Community College
INTERNATIONAL STUDENT SERVICES

Letter Request

SECTION I -- TO BE COMPLETED BY THE STUDENT

Last Name: _____   First Name: _____

Student ID #: _____ Phone #:_____   SEVIS #: _____

(It is on your I-20 and starts with N00.)

Choose one:

___I would like to pick up my letter after 3 business days at ISS - FOC 10, 105. (Currently not available, since ISS is working remotely.)

___I would like my letter to be emailed to me at my MCC email or at this e-address, if no longer an MCC student: _____

___I would like to have my letter(s) mailed directly to <u>me</u> at: (Currently not available, since ISS is working remotely.)

_____

| Address | City | State | Zip Code |

Please indicate the type of letter(s) you are requesting:

__ **Enrollment Verification**

This letter will <u>not</u> include specific classes or grades. This letter will include your:

- Quarters of attendance at MCC
- Current enrollment –full/part time or not enrolled
- Degrees/Certificates earned and date
- Program - Academic major or ESL
- Academic standing
- SEVIS record status and if you are on OPT

Please provide the name of the person, organization, or school and complete address ISS should address the letter to:

_____

| Name | Address | City | State | Zip Code |

__ **Letter to Invite Family/Friends**

Name of the person <u>exactly</u> as it appears on the passport _____

Gender of the person _____   Relationship to you _____

Is the invitation for graduation or a general visit? _____ When? _____

Please provide the <u>complete</u> address of the embassy/consulate that the person will go to. ISS will include it in the letter to make it more professional. You may look up the information through a search engine.

_____

Name of the person (<u>exactly</u> as it appears on the passport) _____

Gender of the person _____   Relationship to you _____

Is the invitation for graduation or a general visit? _____ When? _____

Embassy/Consulate address: _____

__ **Letter to Enroll at Another Institution as an MCC F-1 Student and <u>Not</u> Transfer**

Name of the institution _____

Which class(es) do you want to take?_____

What are the start and end dates of the course? _____

Have you determined if the class(es) will transfer back to MCC? _____

How many credits will you take at MCC during this time? _____

If you are combining credits at the other institution with your MCC credits to be full time, then you need to complete the Concurrent Enrollment form that is available from ISS. If you have at least 12 credit hours at MCC, then you do not need to complete the Concurrent Enrollment form.

__ **Letter for Social Security Administration** – For details, see
https://mccneb.edu/Prospective-Students/Resources/International/Student-Information/Social-Security-Number.aspx.

Signature: _____   Date: _____

SECTION II – TO BE COMPLETED BY THE ISS P/DSO STAFF

P/DSO Initials & Date: _____ Comments: _____

___ Update contact info in SEVIS & Colleague, if needed

___ Compose the letter(s) and make a copy of the letter(s)   ___ Contact the student when the letter(s) is/are done

___ Note in STRK – letter type/addressed to/brief details   ___ Scan and file