

**CERTIFICATION OF ACADEMIC STATUS**  
**for Prospective J-1 Intern**  
at WESTERN CAROLINA UNIVERSITY

This form should be completed and signed by the intern's **Academic Advisor** or other representative at his/her home university.

1. Name of student/intern: \_\_\_\_\_  
(Family Name in CAPITAL letters)

2. Name of Institution: \_\_\_\_\_

3. Address of Institution: \_\_\_\_\_

4. Institution's website address: \_\_\_\_\_

5. Is this institution (check one)

\_\_\_\_\_ Post-secondary institution

\_\_\_\_\_ Other (Explain: \_\_\_\_\_)

6. Is the student/intern named above currently enrolled at your institution?

\_\_\_\_\_ Yes (Answer Question 7)

\_\_\_\_\_ No (Answer Question 8)

7. If currently enrolled

a) Dates of enrollment at your institution: From \_\_\_\_\_ to present  
Date

b) Field of study: \_\_\_\_\_

c) What degree or certificate is this student/intern working on? \_\_\_\_\_  
(Give actual name of degree used by university. Do NOT translate into English)

d) When is student/intern expected to receive degree? \_\_\_\_\_

8. If not currently enrolled:

a) Has student/intern received a degree/certificate from your institution? \_\_\_\_\_ Yes \_\_\_\_\_ No

b) Exact date of degree: \_\_\_\_\_ c) Field of Study: \_\_\_\_\_  
Month/Day/Year

c) Name of degree/certificate: \_\_\_\_\_  
(Give actual name of degree used by university. Do NOT translate into English)

9. Will this internship in the U.S. be used to fulfill degree requirements? \_\_\_\_\_ Yes \_\_\_\_\_ No

10. Other comments about student or internship:

11. Are you (check one)

\_\_\_\_\_ Student/Intern's Academic Advisor

\_\_\_\_\_ Other Institutional Representative (Explain: \_\_\_\_\_)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Title

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

\_\_\_\_\_  
Date