

Receiver's Name

East Los Angeles College

International Student Office G1-101, 1301 Avenida Cesar Chavez, Monterey Park, CA 91754

Tel: (323) 265-8796 Email: elac iso@elac.edu

International Student Service Request

Please print clearly. Allow 5 -10 business days to process request. Last Name First Name Birthdate (MM/DD/YY) ELAC ID# Middle Name Email: Telephone: Physical House Number Apt. No. Street Citv Zip Code Address: No □ Yes Is this a new phone number? Is this a new address? Yes No Clear any outstanding Hold on account before submitting request. Verification Letter (Purpose of letter) Part-Time Permission Letter (Must be registered in at least 9 units to request) Session: ___ Winter ___ Spring ___ Summer ___ Fall School Name: Requesting online courses? ☐ Yes ☐ No Course: ____ Must submit proof of registering within 15 days of registration and **Final Grades** after completion. **Family Visitation Letter** (Not for 1st semester student) Name: Birthdate: _____ Visit date: Relationship to you: If applied before, list information in *Reason* below: Name, Length of time visited. Change Major to: (See Counselor for New Student Educational Plan) **Extend I-20** (New Student Educational Plan and new financial verification) **Travel Signature** (Provide current **Continue I-20** and airline ticket) Traveling Dates _____ to ____ ___ Will ____ Will not renew visa. Must bring new I-94 and new F-1 visa to International Student Office. Reason / Problem (Must fill in - be specific and attach all documents): Student's Signature Date Pick up documents for student (Proof of ID) Document: Student's Name: _____

Revised 5/6/24 Inputted by: _____

Signature