



OFFICE: Global Center 615 North Park Avenue 520-621-4627 global.arizona.edu/iss

CERTIFICATION OF ACADEMIC STATUS

This form must be completed by a representative at the student intern's home university.

STUDENT INTERN INFORMATION					
Passport Name:		Date of Birth	:	/	/
Family Name/Surname	First/Given Name		Month	Day	Year
► HOME UNIVERSITY INFORMATION					
Name of Home Institution:					
Website:					
Accrediting Body:					
► ENROLLMENT INFORMATION					
Is the student intern currently enrolled at you	ur institution? YES NO				
Field of Study:	Degree Pursuing	:			
Is the student intern currently in good acade	mic standing? YES NO				
When is the student intern expected to comp	plete their degree program? Mont	h Day Year			
Will this internship be used to fulfill the educ	ational objectives of the current d	egree program? Y	ES NO		
If the University of Arizona offers employment the student intern to receive such compensations.	=	student intern, does	the home	institut	ion appro
Other Comments:					
CERTIFICATION					
Signature:					
Date:					
Printed Name:					
Title:					
Email Address:					