

INSTRUCTIONS TO COMPLETE THE PROOF OF STUDENT STATUS FORM

The Proof of Student Status Form on the following page must be printed and completed. This form acknowledges your school status and eligibility to participate in a Disney International Program.

Section I should be completed by you.

Which Box Should I Check?

- Box 1: If you have completed at least your first semester or first year of studies and <u>will not</u> be graduating prior to arrival
- Box 2: If you are in your final semester/term and will be graduating (Please enter an approximate graduation date.)
- □ Box 3: If you have graduated (Please enter in the date of graduation as shown on your diploma. You will not need to complete section II.)

Section II should be completed by an authorized representative of your school.*

*Do NOT complete Section II if you have already graduated.

Please ensure your school representative completes the entire section:

- □ Your school must write your enrollment date
- Please be sure that your school circles whether you have completed at least your first semester or first year of schooling
- □ If you are in your final year your school will need to circle if you <u>have or will have</u> completed your coursework and the last date of classes
- □ Your school must write their name, country and representative's information as well as provide an official seal/stamp

It is critical that this document is completed correctly and uploaded into DOC upon completion. Please contact our office if you have any questions.

Thank you! Disney International Recruiting

WALT DISNEY WORLD® Resort International Program

Section I – Student Information

To be completed by the student. Please print legibly on this form. Your full name must appear exactly as shown on your passport.

Student Name:		
	First Name(s)	Middle Name(s)
Please check ONLY ONE of the boxes below:		
□ I hereby certify I am currently enrolled in or pursuing full-time studies in an accredit have completed at least <i>(CIRCLE ONE)</i> : FIRST SEMESTER of studies / FIRST YEAR of stu		ational institution or university and I
□ I hereby certify that I am completing my final term of university/college and will be official must complete Section II)	graduating on the follo	owing date: (School (School)
□ I hereby certify that I am a graduate of an accredited university/college. Graduat	ion Date: DD/MM/YY	, my diploma/degree is attached. YY
If you have previously participated in a Cultural Exchange Visitor Program sponsored by information below. This information can be found on your DS-2019 document. The SE document.		
SEVIS ID # Program Number From: DD/MM/YYYY TO: DD/MM/YYYY - SEVIS ID #	Program Number	From: DD/MM/YYYY TO: DD/MM/YYYY
I hereby certify that all the information on this form is true, complete and accurate to the information will lead to immediate termination of my International Program.	he best of my knowled	ge. I understand that providing false
Student's Signature:	Date:	
Section II – University/College Information		
To be completed by an authorized university/college representative.		
I hereby certify that the above student has been registered (enrolled) to attend our uni least (CIRCLE ONE): FIRST SEMESTER / FIRST YEAR		and has completed at D/MM/YYYY
If student is in their final year: The student (CIRCLE ONE) HAS / WILL HAVE completed	coursework for a diplo	ma/degree on: DD/MM/YYYY
Name of University/College:	_	
I hereby verify that our University/College is an accredited school in the country of on this form is true, complete and accurate to the best of my knowledge.		ereby certify that all the information
University/College Representative Name:	_ Title:	