



International Student Services

Borough of Manhattan Community College
The City University of New York

199 Chambers St., S115N
New York, NY 10007
phone 212-776-7179
fax 212-220-8382

**BMCC INTERNATIONAL STUDENT SERVICE OFFICE
CHANGE OF STATUS DECLARATION & LIABILITY WAIVER FORM**

Date: _____

Name: _____
Last, First

Local address: _____

Phone: _____ Email: _____

College: _____

Degree Program: _____

Major: _____

Please indicate how you will pursue a Change of Status:

- I have decided that I will apply for a Change of Status to F-1 student in the following way:**
- On my own (without an Immigration Attorney's assistance).
 - Immigration Attorney's assistance (*Highly recommended*).

OR

- I have decided to go home to apply for the F-1 student visa instead of applying for a Change of Status.**

I understand and acknowledge that I am completely responsible for properly filing my Change of Status application with U.S. Citizen and Immigration Services (USCIS). The BMCC International Student Service Office (ISSO) does not assume any responsibility or liability in proper filing and does not guarantee or promise any successful outcome.

Your Signature: _____

By typing your name here, you verify and assert that you have read and agree to all statements made on this form and that all information entered is complete and accurate to the best of your knowledge.

Today's date: _____