International Student and Scholar Services (ISSS) 3109 Susquehanna Hall, College Park, MD 20742

www.isss.umd.edu



Foreign Institution Certification

US Department of State Consular Officer

Regarding:	Student Name: Student Date of Birth:		
	Foreign Institution:_		
Dear Sir or	Madam:		
Our institut	ion facilitates a curric	culum at the post-secondary level and is accredited	by
[Accrediting	g Body]		
institution. University of his/her deg	It is my understanding of Maryland, College Force program.	tudent is currently in good academic standing with a general standing with a student internship progular park, s/he intends to return to our institution to cor	ram at the mplete
will fulfill th	ne educational objecti	internship program at the University of Maryland, (ives for the student's current degree program at oues a minimum of hours per week of internship e	r institu-
Sincerely,			
Signature of Dea	an or Academic Advisor		
Name of D	Dean or Academic Advisor	r:	
Address: _			
Email addı	ress:	Phone:	