

## 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 1 should be completed by you, the student.

Which statement should I complete?

- ✓ **CURRENTLY ENROLLED:** Check all that apply if you completed your first semester, first year, and/or if you are in your final term/semester. If you are in your final term and will be graduating, please enter your upcoming graduation ceremony date. Section 2 must be completed by a school representative.
- ✓ **GRADUATED:** If you have graduated, please enter in the date of graduation as shown on your degree/diploma. Do NOT complete Section 2. You will need to attach a copy of your diploma when uploading everything on the DOC site.
  - **Australia/New Zealand Eligible ONLY** – If you have earned a Bachelor's Degree, you must start your program at Walt Disney World® Resort within 12 months of your graduation date.
  - **All Other Graduating Students** – Final year students are eligible to take part in this program during the school's major academic break *immediately* following your graduation.

Please complete all blank spaces!

### Section 2 should be completed by an authorized representative of your school.

*\*Do NOT complete Section 2 if you have already graduated.*

Please ensure your school representative completes the **ENTIRE** section:

- ✓ Your school must write your enrollment date and select whether you have completed your first year and/or first semester
- ✓ If you are in your final term, your school will need to provide your coursework end date (the last date of classes)
- ✓ Your school representative must write their name, their position, country of accreditation, and 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

# Proof of Student Status Form for WALT DISNEY WORLD® Resort

## Section 1 – Student Information *to be completed by the student.* Please print legibly on this form.

Student Name as shown on your passport.

\_\_\_\_\_  
Last Name/Family Name(s)

\_\_\_\_\_  
First Name(s)

\_\_\_\_\_  
Middle Name(s)

<b>Select and Complete ONE Statement</b>	<input type="checkbox"/>	<b>Currently Enrolled</b>	I hereby certify that I am currently enrolled in full-time studies in an accredited university/tertiary level educational institution.  <b>Check All That Apply</b> I completed at least <b>1st semester</b> of studies: <input type="checkbox"/> Yes I completed at least <b>1st year</b> of studies: <input type="checkbox"/> Yes  I am in my <b>final term</b> of studies...: <input type="checkbox"/> Yes <i>...and my expected graduation ceremony/walk date is:</i> _____ <div style="text-align: right;">DD/MM/YYYY</div>
	<input type="checkbox"/>	<b>Graduated</b>	I hereby certify that I am a graduate of an accredited university/tertiary level educational institution.  Diploma Date: _____ <b>*Attach Degree/Diploma</b> <div style="text-align: center;">DD/MM/YYYY</div>

If you have previously participated in a Cultural Exchange Visitor Program sponsored by the WALT DISNEY WORLD® Resort, please complete the information below. This information can be found on your DS-2019 document. The SEVIS ID number is in the upper right corner of the DS-2019 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 best of my knowledge and I understand that providing false information will lead to immediate termination of my International Program.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Section 2 – University/Tertiary Level Educational Institution Information

<b>ALL BOXES</b> below must be completed by an authorized educational institution/university representative.	
Student completed at least <b>1st semester</b> of studies: <input type="checkbox"/> Yes Student completed at least <b>1st year</b> of studies: <input type="checkbox"/> Yes	<b>Registration/Enrollment Date:</b> _____ <div style="text-align: right;">DD/MM/YYYY</div>
<b>Is the student in their Final Term?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, student will complete coursework on</i> _____ <div style="text-align: right;">DD/MM/YYYY</div>	<b>Official Seal/Stamp</b>     
<b>Name of Educational Institution/University</b>	
<b>Country of Accreditation</b>	

I am an educational institution/university representative and I hereby certify that all the information on this form is true, complete and accurate to the best of my knowledge.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_