

Petition for Approval of School for Attendance by Nonimmigrant Student

SEVP School for Advanced SEVIS Studies BAL214F44444000

Section 1: Contact Information

1.1 Approval for Attendance of Students Under:

Section 101(a)(15)(f) of the Act (academic and language students)

1.2 Name of School or School System: SEVP School for Advanced SEVIS Studies

1.3 Name of Main Campus: SEVP School for Advanced SEVIS Studies

1.4 Mailing Address of the School:

126 N WAYNE ST
ARLINGTON,VA 22201

1.5 Telephone Number: 555-555-5555

1.6 Fax Number: 555-555-5555

1.7 Physical Location of the school:

126 N WAYNE ST
ARLINGTON,VA 22201

1.8 School Type: Public

Section 2: Program of Study

2.1 This School is Engaged in:

Vocational or Technical Education (M-1)

Flight Training

Higher Education (issuing one or more of the following degrees: Associate's, Bachelor's, Master's, PhD.)

Other: Professional Certificates

This school **does** confer recognized Associates, Bachelor's, Master's, Doctor's, Professional, or Divinity degrees.

It's credits **are** recognized by and transferable to institutions of study which confer degrees.

This school **does** qualify its graduates for employment in the occupation for which preparation is offered.

2.2 Areas of Study:

Liberal Arts
 Fine Arts
 Religious
 Professional Studies
 Vocational Or Technical Training
 Flight Training
 Science
 Education
 Business
 Engineering
 Other: pastoral care

2.3 Degrees Available from this School:

Associate Certificate	Bachelor of Business Administration (BB/BBA)
Associate Non-Degree	Bachelor of Fine Arts (BFA)
Associate Degree Nurse/Nursing (ADN)	Bachelor of Science in Education (BEd/BSEd)
Associate of Applied Science (AAS)	Bachelor of Science in Environmental Engineering (BSEnE/BSEnE)
Associate of Arts (AA)	Bachelor of Science/Scientiae Baccalaureus (BS, SB)
Associate of Electrical Engineering Technology (AEET)	Master of Arts (MA/AM)
Associate of Electronics (AE)	Master of Business Administration (MBA)
Associate of Engineering (AE/AEng)	Master of Science (MS)
Associate of Engineering Technology (AET/AEngT)	Master of Science in Information Science/Systems (MSIS)
Associate of Forestry (AF)	Doctor of Education (EdD)
Associate of Science (AS)	Doctor of Medicine (MD)
Bachelor Other	Doctor of Philosophy (PhD)
Bachelor of Arts (BA)	Other
Bachelor of Architecture (BArch)	

2.4 Courses of Study and Time Necessary to Complete each:

Bachelors degree - 4 years except BSN which is 5

Section 3: Accreditations and Recognitions

3.1 Date School Was Established: 01/01/2003

3.2 Department of Education Recognized Accrediting Agencies:

01/01/2003 - 12/31/2050 Middle States Commission on Higher Education

3.3 SEVP Identified Accrediting Agencies:

None

3.5 Optional Comments:

left blank

3.6 FAA Certification:

01/01/2003 - 05/02/2020 Part 141 Certification Number: 12345678

Section 4: School Calendar, Costs, and Demographics**4.1 This School's Sessions are based on:**

Semesters

4.2 Date Registration begins for EACH session during a calendar year:

January 20

August 21

4.3 Sessions are Held: Day and Night**4.4 Average Annual Number of classes: 500****4.5 Average Annual Number of Students: 3000****4.6 Average Annual Number of Teachers or Instructors: 1000****4.7 Average Annual Number of Non-Teaching Employees: 500****4.8 Approximate Annual Cost of Room, Board, Tuition, etc. per Student: 21000****4.9 Requirements for Admission: sufficient GPA****Section 5/6: Campuses and Instructional Sites and Officials****SEVP School for Advanced SEVIS Studies Main Campus:** SEVP School for Advanced SEVIS Studies**Mailing Address:** 126 N WAYNE ST, ARLINGTON, VA, 22201-1516**Physical Address:** 126 N WAYNE ST, ARLINGTON, VA, 22201-1516**Telephone Number:** 555-555-5555 **Fax Number:** 555-555-5555

Officials Name	Title	Role	Telephone #	E-Mail Address
Robertson, Helene	Director	PDSO	222-222-2222	Helene.Robertson@associates.ice.dhs.gov

Infield, Jared	Advisor	DSO	301-555-5555	jared.m.allen@associates.ice.dhs.gov
Feet, Rita	International Scholar Advisor	DSO	222-222-2222	Rita.Feet@associates.ice.dhs.gov
Alabama, Jared	Director of International Programs	DSO	555-555-5555	jared.m.allen@associates.ice.dhs.gov
Maloney, Richard	Advisor	DSO	555-555-5555	Richard.Maloney@associates.ice.dhs.gov
Kanno, Jason	Director	DSO	555-555-5555	helene.robertson@associates.ice.dhs.gov
LaRoche, Jared	Advisor	DSO	555-555-5555	jared.m.allen@associates.ice.dhs.gov
Mercer, Ingrid	Immigration Specialist	DSO	222-222-2222	ingrid.mercer@associates.ice.dhs.gov

SEVP School for Advanced SEVIS Studies Campus: Kanno School for Smart Questions**Mailing Address:** 2451 CRYSTAL DR, ARLINGTON, VA, 22202-4804**Physical Address:** 2451 CRYSTAL DR, ARLINGTON, VA, 22202-4804**Telephone Number:** 555-555-5555 **Fax Number:** 555-555-

Officials Name	Title	Role	Telephone #	E-Mail Address
Robertson, Helene	Director	PDSO	222-222-2222	Helene.Robertson@
LaRoche, Jared	Advisor	DSO	555-555-5555	jared.m.allen@fakechool.edu
Alabama, Jared	Director of International Programs	DSO	555-555-5555	jared.m.allen@fakechool.edu
Maloney, Richard	Advisor	DSO	555-555-5555	Richard.Maloney@fakechool.edu
Feet, Rita	International Scholar Advisor	DSO	222-222-2222	Rita.Feet@fakechool.edu
Kanno, Jason	Director	DSO	555-555-5555	helene.robertson@fakechool.edu
Mercer, Ingrid	Immigration Specialist	DSO	222-222-2222	ingrid.mercer@afakechool.edu
Infield, Jared	Advisor	DSO	301-555-5555	jared.m.allen@fakechool.edu

SEVP School for Advanced SEVIS Studies Campus: SMU Technical Institute**Mailing Address:** 621 Holly Corner Road, Fredericksburg, VA, 22406**Physical Address:** 621 Holly Corner Road, Fredericksburg, VA, 22406

Telephone Number: left blank **Fax Number:** left blank

Officials Name	Title	Role	Telephone #	E-Mail Address
Feet, Rita	International Scholar Advisor	PDSO	222-222-2222	Rita.Feet@fakechool.edu
Infield, Jared	Advisor	DSO	301-555-5555	jared.m.allen@fakechool.edu v
Robertson, Helene	Director	DSO	222-222-2222	Helene.Robertson@fakechool.edu
Maloney, Richard	Advisor	DSO	555-555-5555	Richard.Maloney@fakechool.edu s.
Kanno, Jason	Director	DSO	555-555-5555	helene.robertson@fakechool.edu s.
Mercer, Ingrid	Immigration Specialist	DSO	222-222-2222	ingrid.mercer@fakechool.edu
LaRoche, Jared	Advisor	DSO	555-555-5555	jared.m.allen@fakechool.edu

Certification and Signature by President, Owner, or Head of School

If the school is approved, THE PETITIONER AGREES to maintain SEVIS records and student records in accordance with 8 CFR 214.2 (f), 214.2 (m), 8 CFR 214.3, 8 CFR 214.4 and 8 CFR 248.

Designated school official (DSO) means a regularly employed member of the school administration whose office is located at the school and whose compensation does not come from commissions for recruitment of foreign students. A DSO may not delegate this designation to any other person. An individual whose principal obligation to the school is to recruit foreign students for compensation may not be a DSO. The president, owner, or head of a school system must designate a principal DSO. The principal DSO is required to have a thorough knowledge of the regulations, policies and procedures governing nonimmigrant students, and is responsible for ensuring that each additional DSO has a thorough knowledge of the same.

I, the president, owner, or head of the school or school system named in this petition, certify that:

1. I am authorized to sign this petition on the behalf of this school.
2. The school and its Designated School Officials intend to comply with the regulations listed above.
3. I will be responsible for providing the resources and training necessary for the Designated School Officials to properly implement the regulations referenced above.
4. I understand that if this institution does not fully complies with the regulatory requirements, approval may be withdrawn pursuant to 8 CFR 214.4.
5. All of all information contained within this petition is true to best of my knowledge.
6. I acknowledge that the submission of inaccurate or misleading information may result in the loss of my institution's SEVP certification.
7. I understand that willful misstatements may constitute perjury under 18 U.S.C. 1621.
8. I understand that providing materially false, fictitious, or fraudulent information may subject me to criminal prosecution under 18 U.S.C.1001.

Date

Title

Printed name of President, Owner, or Head of School

Signature

Instructions:

(1) Form I-17, Supplement A, list the designated school officials for each school or campus within a school system (except an elementary or secondary system as noted below), must be attached to each Form I-17, Petition for Approval of School for Admittance by Nonimmigrant Students. If there is a change in designated school officials, a new Supplement A must be completed and submitted to the Immigration and Naturalization Service Office having jurisdiction over the school within thirty days.

(2) "CDesignated school officials" (DSO) means a regularly employed member of the school administration whose office is located at the school and whose compensation does not come from commissions for recruitment of foreign students. A DSO may not delegate this designation to any other person. An individual whose principal obligation to the school is to recruit foreign students for compensation may not be a DSO. The president, owner, or head of a school system must designate a principal DSO. The principal DSO is required to have a thorough knowledge of the regulations, policies and procedures governing nonimmigrant students, and is responsible for ensuring that each additional DSO has a thorough knowledge of the same.

Each school or institution must have one principal DSO, and may have up to ten DSO's at any one time, except at the discretion of the district director of the DHS office having jurisdiction over the school. In a multi-campus institution, each campus must have a principal DSO. In an elementary or secondary school system, however, the entire school system is limited to a total of ten designated officials at any one time.

I, THE UNDERSIGNED, have read the Department of Homeland Security's regulations relating to nonimmigrant students, namely 8 CFR 214.1, 8 CFR 214.2(f), and/or 8 CFR 214.2(m); the Department's regulations relating to change of nonimmigrant classification for students, namely 8 CFR 248; the Department's regulations relating to school approval and withdrawal of school approval, namely 8 CFR 214.3 and 214.4, and intend to comply with these regulations at all times. I understand that willful misstatements may constitute perjury (18 U.S.C. 1621) and that providing materially false, fictitious, or fraudulent information may subject me to criminal prosecution under 18 U.S.C. 1001. Other possible criminal and civil violations may also be applicable.

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Robertson, Helene	Director		222-222-2222	PDSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Infield, Jared	Advisor		301-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Feet, Rita	International Scholar Advisor		222-222-2222	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Alabama, Jared	Director of International Programs		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Maloney, Richard	Advisor		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Kanno, Jason	Director		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
LaRoche, Jared	Advisor		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Mercer, Ingrid	Immigration Specialist		222-222-2222	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Robertson, Helene	Director		222-222-2222	PDSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
LaRoche, Jared	Advisor		555-555-5555	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Alabama, Jared	Director of International Programs		555-555-5555	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Maloney, Richard	Advisor		555-555-5555	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Feet, Rita	International Scholar Advisor		222-222-2222	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Kanno, Jason	Director		555-555-5555	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
Last and First Name	Title	Signature	Telephone Number	Role
Mercer, Ingrid	Immigration Specialist		222-222-2222	DSO

<input type="checkbox"/> Initial Designation	<input type="checkbox"/> Replacement for prior designated official	<input type="checkbox"/> Correction to previous designation
--	--	---

Designated Official: (Print or Type)				
---	--	--	--	--

Last and First Name	Title	Signature	Telephone Number	Role
Infield, Jared	Advisor		301-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
Feet, Rita	International Scholar Advisor		222-222-2222	PDSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
Infield, Jared	Advisor		301-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
Robertson, Helene	Director		222-222-2222	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
Maloney, Richard	Advisor		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
Kanno, Jason	Director		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
Mercer, Ingrid	Immigration Specialist		222-222-2222	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

Designated Official: (Print or Type)

Last and First Name	Title	Signature	Telephone Number	Role
LaRoche, Jared	Advisor		555-555-5555	DSO
<input type="checkbox"/> Initial Designation		<input type="checkbox"/> Replacement for prior designated official		<input type="checkbox"/> Correction to previous designation

I, the undersigned president, owner, or head of the school or school system named below certify that the above individuals are designated school officials of the school or school system. Further, I certify that I will be responsible for providing the resources and training necessary for these officials to implement properly the above referenced regulations.

Name (Print or Type)	Title (Print or Type)	Signature
----------------------	-----------------------	-----------

Name of School System, School, or Campus (list all schools or campuses and their three-digit suffixes for which the above officials are designated if for more than one school or campus but not for the entire school system).	DHS FILE No. if known: 214F Date: (If a multi-campus institution or school system use the 3 digit suffix for the main or initial campus.)
---	--

SEVP School for Advanced SEVIS Studies
 SEVP School for Advanced SEVIS Studies
 000

Address of School System, School, or Campus:
 126 N WAYNE ST, ARLINGTON, VA, 22201-1516

Instructions: Form I-17 Supplement B must be completed and submitted with Form I-17 if a school system or multi-campus institution is seeking approval for a number of schools for admittance by nonimmigrant students. Furnish all known information for each school or campus within the system. If more space is needed to list all schools, attach additional forms as necessary, and number each at the bottom. If an approved school system wishes to update or correct the information on its original Supplement B, a new Form I-17, must be submitted, without fee, accompanied by Supplement B, and, if applicable, Supplement A. Please PRINT or TYPE all information on this form.

Request Action:

- a. Initial approval for the following school(s) or campus(es).
- b. Addition of the following school(s) or campus(es) to the list of approved institutions within the above school system.
- c. Removal of the following school(s) or campus(es) from the list of approved institutions within the above school system.
- d. Change or correction in the following information relating to school(s) or campus(es) which have been approved.

Fill in only the information which is to be added to or adjusted in the DHS records, and the school's three-digit suffix:

1. School or Campus Name: SEVP School for Advanced SEVIS Studies	2. School or Campus 3-digit suffix: 000
3. Mailing Address: (include Zip Code) 126 N WAYNE ST ARLINGTON, VA 22201	4. Physical Address: 126 N WAYNE ST ARLINGTON, VA 22201
1. School or Campus Name: Kanno School for Smart Questions	2. School or Campus 3-digit suffix: 002
3. Mailing Address: (include Zip Code) 2451 CRYSTAL DR ARLINGTON, VA 22202	4. Physical Address: 2451 CRYSTAL DR ARLINGTON, VA 22202

1. School or Campus Name: SMU Technical Institute	2. School or Campus 3-digit suffix: 001
3. Mailing Address: (include Zip Code) 621 Holly Corner Road Fredericksburg, VA 22406	4. Physical Address: 621 Holly Corner Road Fredericksburg, VA 22406