



San Diego Community College District
LOTE Clearance

DRAFT

☐ City ☐ Mesa ☐ Miramar

Name: _____			Student ID Number: _____		
(PRINT)	Last	First	MI		
Address: _____					
	Number	Street	City	State	Zip
Email: _____			Telephone: _____		
Prior School Name: _____			Country: _____		
School Type: <input type="checkbox"/> Primary <input type="checkbox"/> Secondary					
Language: _____					
Documentation attached: <input type="checkbox"/> Transcript <input type="checkbox"/> Diploma					
Student signature: _____					

OFFICIAL USE ONLY

I certify that the student above has completed <i>formal schooling through the sixth grade level or higher in an institution where the language of instruction is not English.</i>		
Name (PRINT): _____	Signature: _____	Date: _____
Department: _____	Email: _____	Phone: _____