



New Student Request for I-20/DS-2019

Instructions – Read Carefully: Please type or print clearly and complete all applicable fields accurately. Inaccurate information may cause delays in processing and difficulties in entering the U.S. **Attach photocopies** of any existing immigration documents (passport, current visa, I-94 card, etc.). **Include original documentation** of financial support (bank statements) for the estimated yearly expenses. Your department will notify us if you are receiving University of Rochester funding. Return this form and attachments to your admitting department. For questions, please contact your department or Stephanie Johnson in the ISO at (585) 275-9201 or via email to: admitquestions@iso.rochester.edu.

Biographical Information: List name as it appears on passport *Passport not available*

Last/Surname: _____ First/Given name: _____

Middle name: _____ Preferred nickname: _____

Date of Birth: MM / DD / YEAR Sex: Male Female Marital Status: Single Married

Country of Citizenship: _____ Country of Permanent Residency: _____

City of Birth: _____ Country of Birth: _____

Current occupation or academic level in home country: _____

Do you have a U.S. Social Security Card? Yes No If 'yes' provide number here: OPTIONAL

Returning Student: University ID#: _____ Reason: Change of Level Return from Absence

Foreign Residential Address: *Per government regulations, this address must be located outside the U.S.*

_____ Phone number: _____

_____ Email: _____

Individuals Currently Residing in the U.S.: **Not Applicable**

♦ *U.S. Residential Address:* _____ *Copies of immigration documents required

City: _____ State: _____ Zip: _____ Phone: _____

F-1/J-1 Immigration Transfers: Photocopies attached

Students in valid F-1 or J-1 nonimmigrant status, who are currently attending another U.S. institution

Current Visa Status: F-1 J-1 SEVIS ID#: N _____ Intended SEVIS Release Date: _____

Current School: _____ Current Degree Level: _____

International Advisor/DSO from Current School: _____

Phone: _____ Email: _____

Note: Students must notify current school and complete all Transfer Out procedures

Change of Immigration Status Requested (COS): Photocopies attached

Individuals who intend to remain in the U.S. and apply for a change to F-1 or J-1 nonimmigrant status

Intended student status: F-1 J-1 Current Immigration Status: _____

* Please contact the ISO (585-275-2866 or admitquestions@iso.rochester.edu) to discuss COS procedures.

Dependents: Please list only those dependents that will accompany student.

No Dependents

Spouse

Child

Date of Birth: MM / DD / YEAR Male Female

Date of Birth: MM / DD / YEAR Male Female

Last Name: _____

Last Name: _____

First Name: _____

First Name: _____

Middle Name: _____

Middle Name: _____

Country of Citizenship: _____

Country of Citizenship: _____

Country of Birth: _____

Country of Birth: _____

City of Birth: _____

City of Birth: _____

For additional dependents, please provide individual information on a separate page.

Proof of Financial Support: Source(s) of Support:

Personal Funds: \$ _____ Anticipated University Funds: \$ _____

Family Funds: \$ _____ Other (specify: _____): \$ _____

Home Government: \$ _____ **Total:** \$ _____

For University use ONLY:

Submit to admitting Department for remaining sections

English Proficiency:

English proficiency is required for all UR programs, except ESL or ELUSC

Student satisfies requirement Student does not satisfy requirement (start date adjusted accordingly)

Proven Ability: TOEFL Score: _____ Standardized Test/Score: _____ Other: _____

Academic Program:

UR Division/Department: _____

Degree Level: Bachelor

Masters

Major/Program: _____

Doctorate

ISIS Code: _____

Start Date: _____

Certificate

Completion Date: _____

Special Visiting Student

Financial Information:

University Expenses:

University Support:

Use Template: Credit Hours _____
OR

Tuition Scholarship: \$ _____

Use Expenses specified:

Assistantship: \$ _____

Tuition/Fees: \$ _____

Fellowship: \$ _____

Living: \$ _____

Other (_____): \$ _____

Other (Books): \$ _____

This support will constitute employment

Dependent Expenses:

Non-University Support:

Dependent Expenses: \$ _____

Non-UR Support: \$ _____

Student will not bring dependents

Student is fully funded by the University

Total Expenses: \$ _____

Total Support: \$ _____

ISIS Entry:

Request Completed By:

University ID#: _____

Name: _____

Date: _____ Phone: _____