



# Application for an I-20

## PLEASE FILL OUT ALL OF THE FOLLOWING INFORMATION

San Jacinto College ID#/Social Security #: \_\_\_\_\_ GENDER: \_\_\_\_\_ Male \_\_\_\_\_ Female

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Last First Middle Initial MM DD YYYY

**SIGNATURE** \_\_\_\_\_

US/LOCAL ADDRESS:  Please send my I – 20 to this address  Will Pick-up in office

Street/Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

***\*USCIS MANDATES THAT ALL F-1 STUDENTS MAINTAIN CURRENT ADDRESS ON FILE. PLEASE NOTIFY THE INTERNATIONAL STUDENT OFFICE OF ANY ADDRESS OR CONTACT CHANGES.***

COUNTRY OF BIRTH: \_\_\_\_\_ COUNTRY OF CITIZENSHIP: \_\_\_\_\_

PROGRAM OF STUDY/MAJOR: \_\_\_\_\_

WHICH DEGREE ARE YOU SEEKING? (CHECK ONE) \_\_\_\_\_ ASSOCIATES \_\_\_\_\_ LANGUAGE PROGRAM

WHICH SEMESTER ARE YOU PLANNING ON ATTENDING? FALL \_\_\_\_\_ SPRING \_\_\_\_\_ SUMMER \_\_\_\_\_

PERMANENT ADDRESS IN HOME COUNTRY:  Please send my I – 20 to this address

Street Address \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_

HOME COUNTRY TELEPHONE NUMBER (with country and city code): \_\_\_\_\_

**FOR OFFICE USE ONLY: Length of program: Beginning \_\_\_\_\_ End \_\_\_\_\_ SEVIS # \_\_\_\_\_**

**CHECK ONE:**  
{ } Initial Attendance FALL SPRING SUMMER (circle one)  
{ } Transfer In  
{ } Change of Status  
{ } Extension of Stay (I-20 expiring/program expired)  
{ } Change of Level/Major  
{ } Reinstatement

**DATE:** \_\_\_\_\_  
**Dependents** \_\_\_\_\_ YES \_\_\_\_\_ NO  
**Type of Visa** \_\_\_\_\_  
**Admission/I-94 #** \_\_\_\_\_  
**Passport Expiration Date** \_\_\_\_\_  
**Driver's License #** \_\_\_\_\_

REQUEST FOR DEPENDENT I20 (F2 STATUS)

DEPENDENT RELATIONSHIP TO PRINCIPAL: \_\_\_\_\_ Spouse \_\_\_\_\_ Child GENDER: \_\_\_\_\_ Male \_\_\_\_\_ Female

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
LAST FIRST Middle Initial MM DD YYYY

COUNTRY OF BIRTH: \_\_\_\_\_ COUNTRY OF CITIZENSHIP: \_\_\_\_\_

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