



SEVIS I-20 REQUEST FORM

Name: _____

Last (Family)

First

Middle

Suffix

Date of Birth: _____

mm/dd/yy

Gender: Male

Female

Country of Birth: _____ Country of Citizenship: _____

What is your current Visa status? _____

Type of I-20 requested

New I-20 (Never issued I-20 from WVC)

Replacement I-20 (Self)

Replacement I-20 (Dependents)

Issue Reason

Initial attendance

Initial attendance - Change of status requested (example - From Visitor to Student Visa)

Continued attendance: Current Session End Date _____ Next Session Start Date _____
(Extension request) mm/dd/yy mm/dd/yy

School transfer (former school): _____

Reinstatement requested

Other reason: _____

Foreign address: _____

(required)

Address

City

Province/Territory

Country

Postal Code

U.S. address: _____

(if applicable)

Address

City

State

Zip Code

Education level sought: Transfer Associate Degree Certificate

Major: _____

Is English your primary language of instruction/speaking? Yes No

New Students Only: TOEFL Score: _____ TOEFL Date: _____
mm/dd/yy

Passport #: _____ Issuing country: _____

Passport expiration date: _____ Visa#: _____ Current Visa type: _____
mm/dd/yy

City, Country of visa issuance: _____ Visa expiration date: _____
mm/dd/yy

Admission number (1-94): _____

First Port of Entry: _____ Date of entry: _____
Into USA Into USA mm/dd/yy

In what Visa status did you enter the U.S initially? _____

(over)

(#1- #5 FOR CONTINUING STUDENT USE ONLY)

1. I-20 Extension - To complete coursework toward an AA/AS or Transfer
Are you currently in status? _____

2. I-20 To Apply for Practical Training/OPT
during studies _____ vacation _____ after completion of studies _____

Social Security number: _____ - _____ - _____ *Include a copy of card

Have you applied to Records to graduate? _____ *Submit a copy of Petition to Graduate

3. I-20 Change of Major
Attach a copy of notification from the Admissions that you have changed major

Major: _____

Level of education change: _____ Certificate to Associates _____ Associates to Transfer

4. I-20 Change of Funding
Attach documentation on new funding source. Explain: _____

5. Replace a Lost I-20 or Correct I-20 (circle one)
Specify in space provided what corrections must be made: _____

(NAME CHANGES MUST BE VERIFIED BY PASSPORT)

To All Applicants

Please provide a copy of:

- Photo Page of the Passport
- Visa Page
- I-94 Card (front and back)

<p>Bank Statement Verification</p> <p>\$16,500</p> <p>\$2,500 (extra, spouse)</p> <p>\$1,000 (extra, per child)</p>

<p>Allow 5 working days for preparation of I-20. You must schedule an appointment to meet with the International Student Advisor to process your I-20. Please call Counseling Office at (408) 741-2009.</p>

Print Name: _____ Date: _____
Last First mm/dd/yy

* Signature: _____

* Email Address: _____

* (required)

Failure to provide ALL the above Information will result in a delay in your I-20 request.