



I-20 REQUEST FORM FOR INTERNATIONAL STUDENTS

Please type or print clearly in **BLACK INK**. Please print legibly.

STUDENT NAME

_____ *Last* _____ *First* _____ *Middle*

DATE OF BIRTH

_____ *Month / Day / Year*

GENDER MALE FEMALE OTHER

COUNTRY/ TERRITORY OF BIRTH

E-MAIL

FOREIGN ADDRESS

Building No: _____ *Apt No:* _____

Street: _____

City: _____ *State/Province:* _____

Zip Code: _____ *Country/Territory:* _____

**U.S. ADDRESS
(If Applicable)**

Building No: _____ *Apt No:* _____

Street: _____

City: _____ *State:* _____ *Zip Code:* _____

**TRANSFER FROM
(If Applicable)**

Name of school: _____

Address _____

Phone: _____ *Fax:* _____ *Name of DSO:* _____

EDUCATION LEVEL DESIRED AT CALUMS:

- Master of Science in Computer Information Systems (M.S.C.I.S.) Master of Business Administration (M.B.A.)

APPLYING FOR THE TERM BEGINNING:

- WINTER 20__ SPRING 20__ SUMMER 20__ FALL 20__

FINANCIAL INFORMATION

- STUDENT'S PERSONAL FUNDS FAMILY FUNDS FROM ABROAD SPONSOR IN U.S.A.

DEPENDENTS FOR F-2 VISA

LAST NAME	FIRST NAME	DATE OF BIRTH	GENDER	RELATIONSHIP	COUNTRY OF BIRTH	COUNTRY OF CITIZENSHIP

Please mail my I-20 form by express mail. (Additional \$50 – \$100 required)

CHANGE-OF-STATUS required: Current visa _____ Exp. Date: _____ (Please attach a copy)

NOTE: Your I-20 Form cannot be processed until all documents are completed and an acceptance letter is issued by the Director of Admissions. Please note that it takes at least three (3) working days to process I-20 documents.

FOR OFFICE USE ONLY	
I-20 ISSUED ON	_____
I-20 MAILED ON	_____
EXPRESS AIR BILL#	_____