Surname(s)/Last Name(s): First Name(s)/Given Name(s):

ADELPHI UNIVERSITY NEW YORK

F-1 I-20 Request Form for Prospective Students

Please type or print clearly and complete all applicable fields (without white-out or cross-outs). You must attach to this form all required immigration documents (financial documents, copy of passport, etc.) and submit them with your application to **admissions@adelphi-international.org.** For reason of privacy, security and fraud prevention, the Form I-20 must be issued directly by a school to the nonimmigrant student, his or her dependents, or, for minors, to their parent or guardian of the nonimmigrant student.

PURPOSE:

☐ Initial I-20 (From Abroad) ☐ Transfer from U.S. School ☐ Change of Status (Current Status _____)

APPLICANT INFORMATION:

NAME (as it appears on passport)

Surname(s)/Last Name(s): First Name(s)/Given Name(s):

Preferred Name:

OTHER INFORMATION

E-mail Address:

Date of Birth (DD/MM/YYYY): Gender: ☐ Male ☐ Female

Country of Birth: Country of Citizenship:

Start Semester: ☐ Fall ☐ Spring ☐ Summer Intended Program:

FOREIGN ADDRESS: Please complete the student or parent's address in your home country.

Street Address:

City: Province/Territory: Postal Code:

Country:

MAILING ADDRESS FOR I-20: Please list the address you would like your I-20 mailed to. Please note that the address provided must belong to the student or parent, per SEVP Guidance.

Street Address:

City: Province/Territory: Postal Code:

Country: Phone Number (Required):

Surname(s)/Last Name(s): First Name(s)/Given Name(s):

ADELPHI UNIVERSITY – I-20 REQUEST FORM FOR PROSPECTIVE STUDENTS

LOCAL U.S. ADDRESS: If currently residing in the United States, list your complete home address. (Required for all I-20 transfers.)

Street Address:

City: State: Zip Code:

Phone Number: County:

DEPENDENTS:

Do you have dependents you would like to add to your I-20? ☐ Yes ☐ No (If you answer "no," please skip to signature section on bottom of page.)

If yes, please list all dependents who will be accompanying you to live in the U.S. during your studies. Only your legal spouse and dependent unmarried children under the age of 21 can be claimed as dependents. If your spouse and/or children are accompanying you to the U.S., you must show an additional $10,000 for your spouse and $5,000 for each dependent child. A copy of each passport and proof of relationship (marriage license or birth certificate) must also be submitted to Adelphi International for issuance of the dependent I-20.

Please list names as they appear in passports.

	Dependent 1	Dependent 2
Relationship	☐ Spouse ☐ Child	☐ Spouse ☐ Child
Surname(s)/Last Name(s)		
First Name(s)/Given Name(s)		
Middle Name(s)		
Date of Birth (DD/MM/YYYY)		
Gender		
Country of Birth		
Country of Citizenship		

	Dependent 3	Dependent 4
Relationship	☐ Spouse ☐ Child	☐ Spouse ☐ Child
Surname(s)/Last Name(s)		
First Name(s)/Given Name(s)		
Middle Name(s)		
Date of Birth (DD/MM/YYYY)		
Gender		
Country of Birth		
Country of Citizenship		

Applicant Signature: Date: