

GRADUATE COLLEGE

Graduate and Professional Admissions and Academic Support Unit, 309 Coble Hall, 801 S Wright St, Champaign, Illinois 61820

International Student Verification Form Part A

COMPLETION OF THE ENTIRE FORM IS MANDATORY

In order to complete your admission process, you are required to complete this form and mail/fax it to your departmental office as soon as possible. Incomplete information may delay admission processing.

STUDENT INFORMATION: Provide student's name **exactly as listed on passport. PLEASE DO NOT USE ALL CAPITAL LETTERS.**

Last / Family _____ First _____

Middle _____

Date of Birth _____ / _____ / _____
Month Day Year

Gender Male Female

Birth City _____ Birth Country _____

Country of Citizenship _____ Country of Legal Permanent Residence _____

E-mail Address: _____

CURRENT VISA HOLDERS (not F or J):

If you currently hold a visa (e.g., H, R, but NOT F or J visa eligibility documents), please provide the following information:

Visa Type: _____ Expiration date: _____

Do you plan to remain on your current visa for your studies at UIUC?

Yes (skip to "Address Information")

No, I would like to change to F-1 or J-1 (go to "Request for Visa Eligibility Documents")

CURRENT F-2 or J-2 HOLDERS:

If you currently hold a F-2 or J-2, please specify which one: F-2 J-2

SEVIS Number: _____ Expiration date: _____

Check here if the University of Illinois at Urbana-Champaign (UIUC) issued your F-2 or J-2 (otherwise, indicate institution below)

Educational Institution that issued your F-2 or J-2: _____

City: _____ State: _____ Phone: _____

If you currently hold a J-2, do you plan to remain on the J-2 for your studies at UIUC? (Note: F-2 holders cannot study full time at a U.S. educational institution)

Yes

No (complete "Request for Visa Eligibility Documents")

STUDENT'S
NAME:

Last/Family

First

Middle

DATE OF

BIRTH:

MM

DD

YYYY

CURRENT F-1 or J-1 HOLDERS (Students only):

If you currently hold a F-1 or J-1 visa eligibility document, please specify which one:

F-1 J-1 (If you checked J-1, were you: a student OR a scholar?)
(Note: if you are/were a J-1 scholar, please complete "Change of status" section, under "Request for Visa Eligibility Documents")

Please check here if you are currently on Practical Training (OPT/CPT)
International Student Verification Form – Part A (continued)

SEVIS Number: _____ I-20 / DS-2019 Expiration date: _____

Check here if UIUC issued your F-1 or J-1 (otherwise, indicate institution below)

Educational Institution that issued your F-1 or J-1: _____

City: _____ State: _____ Phone: _____

Date of end of program (end of semester or OPT/CPT): _____

REQUEST FOR VISA ELIGIBILITY DOCUMENTS:

Check type of visa eligibility document you are requesting.

I-20 (F-1) DS-2019 (J-1) → what is your current occupation? _____

Please check the non-immigrant status that best applies to you (this will help us to process the correct document for you):

Initial I-20/DS-2019 (if you are arriving in the U.S. from outside the country for purposes of attending UIUC)
(**Note:** If you register at another U.S. educational institution, including an English language program, before enrolling in a degree program at UIUC, please notify your department. We will issue an I-20/DS-2019 with the same SEVIS number as your initial document.)

Continuing UIUC studies (if you are/were attending UIUC or are on Practical Training at UIUC)

Transfer I-20 / Continuing studies in the U.S. (if you are/were attending another U.S. educational institution or are on Practical Training at another U.S. educational institution)

Change of status (if you are changing your visa type or visa eligibility type to F-1/J-1)
→ If you change your visa type (e.g., F-2 to F-1, J-1 to F-1 or H4 to F-1), do you (please check one):

Plan to leave the country before your program begins? OR Plan to stay in the U.S.?

(Note: for more information on changing your status, please contact International Student and Scholar Services at (217) 333-1303.)

ADDRESS INFORMATION: Documents cannot be issued unless both addresses are provided.

Mailing Address (where you want your admission papers and I-20 / DS-2019 to be mailed):

Street 1: _____

Street 2: _____

City: _____ Province: _____ Postal Code: _____

Country: _____

Country of Citizenship Permanent Residential Address:

Street 1: _____

Street 2: _____

City: _____ Province: _____ Postal Code: _____

Country: _____

(Note concerning Country of Citizenship Permanent Residential Address: (1) No dormitory or school addresses unless Faculty Housing. If you live in the dormitory, provide your parents' or other family member's address. (2) No PO Box addresses unless street address is included. (3) Company address is acceptable.)

STUDENT'S

NAME: _____ / _____ / _____
Last/Family First Middle

DATE OF

BIRTH: ____ / ____ / ____
MM DD YYYY

CHANGES TO CURRENT FINANCIAL INFORMATION (if you are requesting an I-20/DS-2019):

Please indicate any changes in your financial sponsorship and certification in the space provided. Note that any changes of information may delay processing. **If there are changes, send the necessary documentation (originals) to your department with this form attached.**

NOTE: If there is a change in any visa information you provided in the section above, please notify your department as soon as possible.

DEPENDENTS: If you are requesting an I-20/DS-2019, will your dependent spouse and/or children be accompanying you?

Yes Please complete Part B of the International Student Verification Form
(Number of dependents: _____)

No **Return only** Part A to your department

CERTIFICATION: *I certify that all the information I have provided on this form is correct. I understand that my visa eligibility document will be issued based on the information I have provided and that no corrections can be made to the visa eligibility document once it has been issued.*

STUDENT'S SIGNATURE

DATE

International Student Verification Form Part B Accompanying Dependent Information

Student's Last Name _____

First _____ Middle _____

Date Of Birth: _____
Month Day Year

If dependents are accompanying you, you must certify to the University of Illinois at Urbana-Champaign and the U.S. embassy or consular office in your country that you have additional adequate financial resources for your accompanying dependents. The additional expense for one dependent is estimated to be approximately \$6,200 per year, for two dependents is approximately \$9,980 per year, and for three dependents is approximately \$11,900 per year. For each additional dependent, the expense is estimated to be an additional \$1,920 per year.

If the previously submitted financial documentation does not cover these additional costs, please send new (original) financial documents with this form (must be received before I-20/DS-2019 can be issued), and indicate the changes on Part A.

DEPENDENT 1:Is this dependent currently in the U.S.? No Yes If yes, dependent's SEVIS number _____

Dependent's Name (exactly as listed on passport):

Last/Family / First / MiddleGender: Male Female Date of Birth _____
Month Day YearRelationship to student: Spouse Child

Birth City _____ Birth Country _____

Country of Citizenship _____

Country of Legal Permanent Residence _____

STUDENT'S NAME: _____ / _____ / _____
Last/Family First Middle
DATE OF BIRTH: _____ / _____ / _____
MM DD YYYY

DEPENDENT 2:

Is this dependent currently in the U.S.? No Yes If yes, dependent's SEVIS number _____

Dependent's Name (exactly as listed on passport):

_____ / _____ / _____
Last/Family First Middle

International Student Verification Form – Part B (continued)

Gender: Male Female Date of Birth _____ / _____ / _____
Month Day Year

Relationship to student: Spouse Child

Birth City _____ Birth Country _____

Country of Citizenship _____

Country of Legal Permanent Residence _____

DEPENDENT 3:

Is this dependent currently in the U.S.? No Yes If yes, dependent's SEVIS number _____

Dependent's Name (exactly as listed on passport):

_____ / _____ / _____
Last/Family First Middle

Gender: Male Female Date of Birth _____ / _____ / _____
Month Day Year

Relationship to student: Spouse Child

Birth City _____ Birth Country _____

Country of Citizenship _____

Country of Legal Permanent Residence _____

If additional dependents are coming, please attach a separate sheet with the same information as above for each.

CERTIFICATION: I certify that all the information I have provided on this form is correct. I understand that my visa eligibility document will be issued based on the information I have provided.

STUDENT'S SIGNATURE

DATE