

INTERNATIONAL STUDENT SERVICES
3000 NW 83rd Street
Building S, Room 310
Gainesville, FL 32606
Phone 352-395-5607/Fax 352-395-4484
international@sfcollge.edu



I-20 REQUEST

Please complete and submit this form to the Office of International Student Services (ISS) or email it at international@sfcollge.edu. You will receive an email when your new I-20 is available.

Student Information

Last Name	First Name	SFID
E-mail	Degree Level	Major of Study
SEVIS ID Number		

REPRINT STUDENT'S I-20* Damaged Lost Stolen Travel

REPRINT DEPENDENT'S I-20* Damaged Lost Stolen Travel

REMOVE DEPENDENT Surname: _____ Given name: _____

Reason: Dependent Change of Status (*provide copy of approval notice*)
 Dependent left the U.S. Indefinitely (*provide copy of flight itinerary*)
 Other: _____

ADD DEPENDENT Is your spouse/child currently in the US? Yes No

•If Yes, what is their current visa Status: F1 Other: _____

•If Yes, will your dependent Leave the US to apply for F2 abroad (outside of the US), or
 Apply for change of Status to F2 in the U.S.

Proof of Financial Support: To add a dependent, proof of \$6,000 is required for your spouse and \$2,500 for each child. Please indicate each type and provide proof of financial support. The funding letter must be on letter head, current, up-to-date, less than one year old, and the amount must be in U.S. dollars. *NOTE: You are only required to show the amount above to add each dependent, however, once your dependent(s) has been added to your SEVIS record, you are required to show the total amount indicated on the I-20 in order for them to apply for F2.*

Personal and/or Family: Verification of funds, such as a bank statement (with name of sponsor, date, amount and type of currency) is required.

- Government Sponsor:** A copy of the signed letter certifying sponsorship is required. The letter must list what is covered, include the amount of the monthly stipend and identify the type of visa required.
- Scholarships:** A copy of the award letter is required.
- Other (Provide signed certification.):**

DEPENDENT'S INFORMATION	Dependent #1	Dependent #2
Surname/Family Name:		
Given/First Names:		
Gender (Male or Female):		
Date of Birth (MM/DD/YYYY):		
Relationship (Spouse or Child):		
Country of Birth:		
Country of Citizenship:		
Country of Permanent Residence:		

Student's Name: _____ Student's Signature: _____ DATE: _____
 (mm/dd/yyyy)