



**STUDENT I-20 REQUEST FORM**  
**(Submit with passport copy and \$250 processing fee)**

**Name (As in Passport):** \_\_\_\_\_  
First Middle Last

**Date of Birth:** \_\_\_\_\_  
(DD/MM/YYYY)

**Home Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contact Number(s):** \_\_\_\_\_  
(Country code - Phone Number)

**Email:** \_\_\_\_\_

\_\_\_\_\_  
Signature

**DO NOT WRITE BELOW THIS LINE**

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**FOR OFFICIAL USE ONLY**

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