

International Student Verification Form

This form is used to request an I-20 or DS-2019 for graduate study at the University of Illinois at Urbana-Champaign.

Student Information

Last / Family Name: _____

First Name: _____ Middle Name: _____

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

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Visa Eligibility Document Request

Please select the visa eligibility document you are requesting: I-20 (F-1 visa) DS-2019 (J-1 visa)

Current Occupation (DS-2019 Requests Only): _____

Are you requesting any dependent I-20s / DS-2019s? Yes No If yes, how many? _____

Please see page 2 to provide dependent information.

Please indicate the type of I-20 / DS-2019 that best applies to you:

- Initial (for students arriving in the US from outside the country for purposes of attending Illinois)
- Change of Level (for current Illinois students changing degree level)
- Transfer (for active F-1 or J-1 students in the US who will transfer their SEVIS record to Illinois)*

Current Institution: _____

SEVIS Number: _____

- Change of Status (for non-student visa holders in the US wishing to change status to an F-1 student visa)

Current Visa Type: _____

- I plan to leave the country before your program begins and enter with an initial I-20.
- I plan to stay in the U.S. and file your change of status within the US.

*To be eligible for a transfer I-20 or DS-2019, you must not have had longer than a 5 month break between enrollment/training at your current institution and enrolling at Illinois.

Contact Information

Email Address: _____

Mailing Address

Address Line 1: _____

Address Line 2: _____

City: _____ Province: _____

Country: _____

Permanent Address

Address Line 1: _____

Address Line 2: _____

City: _____ Province: _____

Country: _____

Dependent Information

Dependent 1:

Relationship to student: Spouse Child

Last / Family Name: _____

First Name: _____ Middle Name: _____

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

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Dependent 2:

Relationship to student: Spouse Child

Last / Family Name: _____

First Name: _____ Middle Name: _____

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

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Dependent 3:

Relationship to student: Spouse Child

Last / Family Name: _____

First Name: _____ Middle Name: _____

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

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Dependent 4:

Relationship to student: Spouse Child

Last / Family Name: _____

First Name: _____ Middle Name: _____

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

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Dependent 5:

Relationship to student: Spouse Child

Last / Family Name: _____

First Name: _____ Middle Name: _____

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

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____