ISSS International Student & Scholar Services

UNIVERSITY OF MINNESOTA

SERVICE REQUEST FORM

GENERAL INFORMATION

Student should complete the section below.

1. Student's Name _____ (Family name) _____ (First name) _____ (Middle)

2. U of M ID# _____

3. SEVIS ID # _____ (On your I-20 above the bar code or your name)

4. Email _____

5. Phone _____

6. Birthdate _____ (Month) _____ (Day) _____ (Year)

7. Country of Citizenship _____

8. I-20 expiration date _____ (Month) _____ (Day) _____ (Year) (Program End Date on your I-20)

Passport expiration date _____ (Month) _____ (Day) _____ (Year)

Visa expiration date _____ (Month) _____ (Day) _____ (Year) (Canadians can skip this question)

9. Has financial information changed? ☐ Yes (submit Financial Certification Form) ☐ No

10. If dependent (spouse and/or children) exists, does dependent hold F-2 visa? ☐ Yes ☐ No ☐ N/A

REQUEST

Student should complete the section below.

Please check appropriate response:

☐ Travel Signature for Reentry on I-20

☐ Have you or anyone on your behalf filed for or received legal permanent residency (green card)?

☐ Travel Signature for Reentry on Dependent I-20

☐ Replacement - check one: ☐ lost ☐ stolen ☐ damaged ☐ travel

☐ Change of major to _____

☐ Other, please specify _____

*If you are or intend to be an applicant for International Student & Scholar Services (ISSS)/University financial aid, be aware that it is possible to lose funding due to the financial information as it appears on your I-20. By having an existing I-20 signed for reentry for yourself or your dependents or by having a new I-20 prepared for change of degree and/or major with the same financial information, you are confirming that your financial information is accurate for the next 12 months. If you have applied or intend to apply for financial aid, please see an ISSS financial aid advisor **before** requesting a signature for reentry or a new I-20 that reflects the same financial information. By signing below you are verifying that you understand this statement and agree to comply with these terms.*

_____ Student's Signature

_____ (Month) _____ (Day) _____ (Year)

ISSS will complete this section:

☐ Enrollment: _____ (# of credits)

☐ Program Plan

☐ Holds

☐ Give I-20 due date slip to student

International student adviser initials _____

Adviser Comments _____

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Ready by: _____