



Request for New or Revised I-20

| Biographical Data: (To be completed by the Student) | | | |
|--|---------------------|--|---|
| Family Name: | | First and Middle Name: | DOB (MM/DD/YYYY): |
| Email: | | TCC ID Number: | SEVIS ID Number: N00 |
| U.S. Local Address: _____ _____ City: _____ State: _____ Zip Code: _____ Phone Number: _____ | | Permanent Foreign Address: _____ _____ City: _____ Province: _____ Postal Code: _____ Country: _____ | |
| Country of Citizenship: | Immigration Status: | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| Current/Active Degree Program: | | | Expected Graduation (Semester/Year): |
| Passport Expiration: | Visa Expiration: | Do you have F-2 dependents? <input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*If yes, provide passports or I-20s for each dependent*</i> | |
| If traveling outside the US, provide the following: | Departure date: | Return date: | Destination: |

| Reason for Request: | | |
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| <input type="checkbox"/> Program Extension: (<i>Must apply at least 30 days before the expiration date of current I-20</i>) I have attached: <input type="checkbox"/> Active Degree Plan <input type="checkbox"/> New Financial Documents <input type="checkbox"/> Letter of Explanation for Extension | | |
| <input type="checkbox"/> Graduating and Starting a New Program or Completing OPT and starting a new program: I have attached: <input type="checkbox"/> Active Degree Plan <input type="checkbox"/> New Financial Documents | | |
| <input type="checkbox"/> Change of Major/Degree: (<i>Must have departmental approval for specialized program; must attach active degree plan</i>) | | |
| Old Major/Degree: | New Major/Degree: | Second Degree (Required for Nursing and Aviation): |
| <input type="checkbox"/> Change of Sponsorship: (<i>Attach new financial documents and sponsor letter, if applicable</i>) | | |
| <input type="checkbox"/> Reprint of I-20 – Reason: <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Travel Endorsement Lines Full | | |
| <input type="checkbox"/> Reentry - Reason: <input type="checkbox"/> Return after Authorized Early Withdrawal <input type="checkbox"/> Correct Status <input type="checkbox"/> Other: (list below) I am returning for the semester/year: <input type="checkbox"/> Fall _____ <input type="checkbox"/> Spring _____ <input type="checkbox"/> Summer I _____ I have attached: <input type="checkbox"/> New Financial Documents <input type="checkbox"/> Active Degree <input type="checkbox"/> Copy of Visa <input type="checkbox"/> I-901 Receipt (if applicable) | | |
| <input type="checkbox"/> F-1 Status: I am leaving the U.S. to apply for a new F-1 visa I have attached: <input type="checkbox"/> Acceptance Letter <input type="checkbox"/> New Financial Documents <input type="checkbox"/> Travel Itinerary <input type="checkbox"/> I-901 Receipt | | |
| <input type="checkbox"/> Other: | | |

I have completed the above information, attached the necessary documents, and understand the regulations regarding this process.
If I have any questions, I will consult with the International Admissions Office

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| Student Signature: | | Date: | |
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