

MONTGOMERY COLLEGE, International Student Office

Supplemental Information for I-20 Request

It is important that you answer all applicable questions on this form. Not doing so may delay the issuance of the I-20 document, and consequently your registration.

[Section I]—Complete this section in full. **USE THE NAME ON YOUR PASSPORT ON THIS FORM.**

(Last Name/Family Name) (First Name) (Middle Name) (ID# if known)

(Local UNITED STATES Address – if known; House Number, Street, City, State, Zip Code)

(phones – home country and US. Please include all digits.) (e-mail address)

(Date of Birth—month/day/year) (Country of Birth) (Country of Citizenship)

(Emergency Contact information: name, relationship, and telephone number – local and English-speaking if possible)

(Financial Sponsor information: name, relationship, telephone number, email (if known))

MAILING ADDRESS IN HOME COUNTRY (REQUIRED INFORMATION-P.O. BOX IS ALLOWED FOR THIS ADDRESS):

(House number and street OR P.O. Box number) (Province or District)

(City) (COUNTRY) (Postal Code – if available)

Gender: Male _____ Female _____ Semester You Wish to Attend: (circle) Fall or Spring year: 20_____

Field of Study/Major: _____

Please provide the following information if any family (spouse, children) *will accompany you*, or is/are in the United States.

Relationship to F-1 **Last Name, First Name** **Date of Birth** **Country of Birth** **Visa Type**
Spouse

Child

Child

[Section II]— Complete this area if you are currently in the United States. **MY VISA/STATUS IS:**

F-1* _____ Submit a legible copy of your current I-20 (all pages), I-94 card, visa, passport ID page, & Employment Authorization Card (if applicable).

*(Name of your School in the United States) (Dates of Attendance) (Admission Number on I-20 or I-94)

B-1/2(visitor)_____ Other (A,G,J,H, etc and #) _____ Dependent of _____ I-94 expires _____

PLEASE CHOOSE: _____ *I will travel outside of the US and apply for an F-1 Student Visa overseas*
_____ *I wish to apply for a Change of Status (appointment with Coordinator required)*