

Port of Entry Program
GUIDELINES FOR OBTAINING A SEVIS FORM I-20

<p><u>INITIAL ATTENCANCE (Overseas)</u> Please provide item 1 to 6</p>
<ol style="list-style-type: none"> 1. Application for the Immigration Certificate of Eligibility (Form I-20) 2. Declaration & Certification of Finances 3. Proof of Financial Evidence (Copy): Admission is for a period of two academic years (\$36,000) unless otherwise indicated for one year (\$18,000): <ul style="list-style-type: none"> • Student’s official current bank statement or signed and stamped bank letter in English (saving or checking) or/and • Affidavit of Support with evidence of income and resources (please refer to the “Sponsor Supporting Evidence” page for details) 4. High school or college graduation diploma (Must be translated in English and notarized) 5. Passport (copy) 6. Commitment deposit: \$100 (Check or Money Order payable to “QCC”. This non-refundable deposit will be credited in full to your tuition bill if you enroll in the program for the upcoming semester)
<p><u>TRANSFER</u> other than the above 6 items, you must also provide item 7 & 8</p>
<ol style="list-style-type: none"> 7. F-1 Student Status Verification Form (Transfer Form) 8. Visa, I-94 card & all previous I-20s (Copy)
<p><u>CHANGE OF STATUS</u> Please provide item 1 to 6 & 9 to 10</p>
<ol style="list-style-type: none"> 9. Visa, I-94 card 10. I-539 form (Please consult program staff for further information)
<p><u>REINSTATEMENT</u> Please provide item 1 to 6, item 8, 10 & 11</p>
<ol style="list-style-type: none"> 11. Student’s written statement and supporting evidence

Please mail or submit the above documents to the Port of Entry Program Department at the Science Building, Room 108, Queensborough Community College, 222-05 56th Avenue, Bayside, NY 11364. We can also be reached through POE@qcc.cuny.edu or at (718)281-5410 and 718-640-9237.

Visit us at www.QCC.CUNY.edu/PortOfEntry

Application for the Certificate of Eligibility for Nonimmigrant (Form I-20) - POE

International students who are admitted into a degree or language program at CUNY will need to obtain a Certificate of Eligibility for Nonimmigrant (F-1) Student (Form I-20), in order to enter and/or remain in the U.S. as an F-1 student. This requirement applies whether you are a new student, a transfer student from another U.S. university, or a student transferring between CUNY colleges. The student's name must be as it appears in the Passport. (Please print clearly)

1	NAME as in passport	Last Name, First Name Second given, or middle name	<input type="checkbox"/> Male <input type="checkbox"/> Female Sex
2	PRIMARY RESIDENCE (Address)	Number and Street City, State Country Postal Code	
3	CONTACT INFORMATION	Telephone Number	Fax Number Email
4	DATE OF BIRTH	Month/Day/Year	PLACE OF BIRTH City and Country
5	COUNTRY	Country(ies) of Citizenship	Country of Residence
6	PERMANENT OVERSEAS ADDRESS	Number and Street City, State Country Postal Code	
7	ADDRESS IN U.S.A. (if known)	Number and Street City, State Country Zip Code	
8	EXPECTED SEMESTER OF ENROLLMENT	<input type="checkbox"/> Fall 20 ____ <input type="checkbox"/> Spring 20 ____	<input type="checkbox"/> Winter 20 ____ <input type="checkbox"/> Summer 20 ____
9	PROGRAM	ENGLISH LANGUAGE TRAINING (ESL)	
10	DID YOU COMPLETE HIGH SCHOOL	<input type="checkbox"/> Yes <input type="checkbox"/> No	11 ARE YOU CURRENTLY STUDYING AT A U.S. INSTITUTION OR COLLEGE? <input type="checkbox"/> Yes <input type="checkbox"/> No
12	DO YOU CURRENTLY HOLD AN F-1 STATUS?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

TO BE COMPLETED BY APPLICANTS ALREADY IN THE U.S.

If you are currently in the U.S., please indicate your immigration status. Attach a copy of the passport pages with the passport number, expiration date of passport, and the U.S. visa stamp. Include copies of both sides of Form I-94 for yourself and accompanying family members.

13	F-1 STUDENT STATUS	<input type="checkbox"/> Yes <input type="checkbox"/> No	CURRENTLY IN STATUS	<input type="checkbox"/> Yes <input type="checkbox"/> No	(Attach copies of ALL your previously issued Forms I-20)
14	UNIVERSITY THAT ISSUED MOST RECENT FORM I-20			SEVIS #	
15	CURRENT U.S. SCHOOL	Name:	Address:	Number and Street	City State Zip Code
16	OTHER IMMIGRATION STATUS (IF APPLICABLE, SPECIFY TYPE)				
17	I-94 ADMISSION NO.		I-94 EXPIRES ON	Month/Day/Year	

SPONSOR SUPPORTING EVIDENCE

In addition to the attached Affidavit of Support, the sponsor must submit evidence of income and resources, as appropriate:

A	<p>Written statement from an officer of the bank or other financial institution or brokerage where the sponsor has accounts, giving the following details regarding the account:</p> <ol style="list-style-type: none"> 1. Date account opened 2. Total amount deposited for the past year 3. Present balance
B	<p>Statement of your employer on business stationery (company letterhead) showing:</p> <ol style="list-style-type: none"> 1. Date and nature of employment 2. Salary paid 3. Whether the position is temporary or permanent 4. Or a recent pay-stub (pay voucher)
C	<p>Additional documents required (if apply):</p> <ol style="list-style-type: none"> 1. Copy of last income tax return filed (if required in your country) 2. Commercial License or Registration (if self-employed)
D	<p>Sponsor in the United States must provide one of the following:</p> <ol style="list-style-type: none"> 1. U.S. Passport 2. U.S. Certificate of Naturalization 3. Permanent Resident Card.

**Estimate of 2011 – 2012
Expenses for International Students Attending the City University of New York**

Tuition and Fees per academic year (12 months) 4,525.00*

Student Living Expenses

Books and Supplies.....	\$480.00
Transportation.....	\$594.00
Personal Expenses	\$4,100.00
Housing.....	\$6,000.00
Meals (at home)	\$2,160.00
Lunch.....	\$594.00
Total Student Living Expenses.....	\$13,928.00

Total First Year Expenses \$18,453.00

* Tuition and Fees stated are based on the students attending full time every term at Queensborough Community College Port of Entry Program. The tuition & fees cost's may rise every semester. Student must attend the Port of Entry full-time program (necessary to maintain lawful immigration status).

DECLARATION & CERTIFICATION OF FINANCES

Please indicate the source and amount of your financial support for the first year or two of study for the Port of Entry language program at Queensborough Community College. The CUNY college that has admitted you requires documentation of guaranteed support for the first year and projected support for future years. Note that costs may rise every semester. Total amounts must meet or exceed the estimate of expenses (see "Sponsor Supporting Evidence" page).

U.S. immigration authorities require colleges to receive satisfactory financial certifications from prospective students before issuing a Form I-20. Therefore, you must attach a copy of the documents for each source of financial support you indicate. Please refer to the "Sponsor Supporting Evidence" page for a list of acceptable supporting documents. Be sure to have an additional set of *original* documents for your appointment at the U.S. Consulate (or Embassy) overseas.

Print clearly with pen only

SOURCES OF FINANCIAL SUPPORT (Amount in U.S. Dollars)

		Guaranteed Support 1st Year	Projected Support 2nd Year
A	STUDENT (if Self-Sponsor)		
Name as in passport <small>The student must provide the following document in English: A bank officer's summary statement of account history, signed and stamped by bank officer.</small>		\$	\$
Name of Bank (if self-sponsor) Location (City) (Country)			
B	NAME OF SPOUSE AND CHILDREN ACCOMPANYING OR FOLLOWING TO JOIN PERSON:		
Spouse (as in passport) Sex Age		\$	\$
Child (as in passport) Sex Age			
Child (as in passport) Sex Age			
Child (as in passport) Sex Age			
C	PARENTS, AND/OR OTHER INDIVIDUAL SPONSORS		
Name Relationship to student		\$	\$
Name Relationship to student		\$	\$
D	GOVERNMENT, UNIVERSITY, OR OTHER SPONSOR		
Source		\$	\$
Source		\$	\$
<small>(Attach current signed official copy of the terms of sponsorship, including amount of support in U.S. Dollars and period covered.)</small>			
GRAND TOTALS		\$	\$

THE COLLEGE CANNOT ISSUE A FORM I-20 UNTIL YOU MEET ALL REQUIREMENTS FOR FINANCIAL DOCUMENTATION.

By signing my name to this form, I certify that the information above is a correct statement of my arrangements for financing my studies at a two year or four year college of The City University of New York.

Student's Signature	Date
Student's Name (Print)	

AFFIDAVIT OF SUPPORT

This form is for individuals using their own income and/or savings to support a student. It must be completed by the person who will provide the student with full or partial financial support and/or room and board during the student's course of study at Queensborough Community College of The City University of New York.

SPONSOR INFORMATION

1	I, _____, citizen of _____, (Name of sponsor) (Country/ies) and residing at _____ (Street) (City/State) (Country) _____ (Postal Code) (Telephone)
2	I am employed with _____ located at: _____ (Street) (City/State) (Country) _____ (Postal Code) (Telephone) I receive an annual income of \$ _____ (U.S.) from this employment. Attach a current salary confirmation statement written by that employer, or verification of annual income for self-employed or retired individuals. The employer statement or verification of annual income must be written in English or come with a certified translation.
3	I have \$ _____ (U.S.) on deposit with: Name of Bank: _____ Address of Bank: _____ (Number and Street) (City) (State) (Postal Code) Attach bank officer's statement of account history.
4a	I currently support _____ persons (including myself). Our total annual income is \$ _____ (U.S.). Our total family expenses are \$ _____ (U.S.).
4b	I sponsor _____ (number) individuals for immigration in addition to this affidavit.

STUDENT SUPPORT INFORMATION (TO BE COMPLETED IF STUDENT WILL LIVE IN THE SPONSOR'S HOME IN THE U.S.)

5	This affidavit is executed on behalf of _____ who was born on _____. (Name of Student) (Month/Day/Year) S/he is my _____. (Relationship to Sponsor)
6	I hereby certify that I am willing, able, and do commit to provide _____ with the annual amount (Name of Student) of \$ _____ (U.S.) for her/his tuition, fees, and/or living expenses each year during the entire program of study at The City University of New York until _____ (give a date when the sponsorship is expected to terminate).

ROOM AND BOARD SUPPORT INFORMATION (TO BE COMPLETED IF STUDENT WILL LIVE IN THE SPONSOR'S HOME IN THE U.S.)

7	I hereby certify that I will provide _____ with (Name of Student) (check one): <input type="checkbox"/> Room only in my home at the address indicated above (valued at \$6,000) ; or <input type="checkbox"/> Full room and board in my home as indicated above (valued at \$8,160) during each year that s/he follows a program of study at Queensborough C.C. Port of Entry Program CUNY.
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SIGNATURE

<i>By signing my name to this affidavit, I certify that the information above is a correct statement of my agreement to sponsor the student herein named.</i>	
Signature of Sponsor	Date
Please print name	Date

F-1 STUDENT TRANSFER ENROLLMENT STATUS FORM

U. S. Citizenship & Immigration Services requires this office to have the following information in order to process your transfer. After you have completed Section 1, **please submit this form to the International Student Advisor** at the last school you attended before you were accepted to this program.

Section 1 – TO BE COMPLETED BY STUDENT

I have been admitted to the Port of Entry English Program at Queensborough Community College for the _____ Semester. I grant permission for the information below to be forwarded to Queensborough Community College's Office of International Student Affairs.

LAST NAME	FIRST NAME	DATE OF BIRTH	SOCIAL SECURITY (STUDENT I.D. NUMBER)
COUNTRY OF BIRTH	I-94 NUMBER		SEMESTER OF REQUESTED ADMISSION FALL, _____ (YR) SPRING, _____ (YR) Summer, _____ (YR)
STUDENT'S SIGNATURE		DATE	

Section 2 – TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISOR

The student named above has been admitted to the Port of Entry Program at **Queensborough Community College** for the term indicated. Please complete **Section 2** and return this letter to the Port of Entry Program Office by mail (Queensborough Community College, S-108, 222-05 56 Avenue, Bayside, NY 11364) or by fax. **In the SEVIS System, Queensborough Community College is located under THE CITY UNIVERSITY OF NEW YORK. (NYC214F00812016)**

SEVIS ID NUMBER	SEVIS RELEASE DATE
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1. Student ____ was / ____ was NOT authorized to attend our school according to Immigration regulations.
2. Student was pursuing a full course of study or maintaining status the preceding _____ term, _____ (year).
Date Attended: From ____ / ____ / ____ (MM/DD/YY) to ____ / ____ / ____ (MM/DD/YY)
3. Student ____ was not pursuing a full course of study or maintaining status the preceding term (or the last term preceding the summer vacation). Please contact us before transferring the student out in the SEVIS if reinstatement is needed.
4. In my opinion the student is eligible for transfer under Notification Procedure: YES ____ / NO ____

Comments: _____

Signature of Designated School Official: _____ Date: _____

Name of DSO (Please Print) _____ Title: _____

Name of Institution: _____ Phone: _____ Fax: _____

Address: _____ E-Mail: _____