



*Please complete the following information about your spouse and/or dependents only if they will come with you to the United States*

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Family (Surname)

First (given)

Middle

Date of Birth \_\_\_\_\_ Country of Birth \_\_\_\_\_

Relationship \_\_\_\_\_

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Family (Surname)

First (given)

Middle

Date of Birth \_\_\_\_\_ Country of Birth \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Have you been notified of your admission to our school ?

Yes \_\_\_\_\_ No \_\_\_\_\_

*Please note that your Form I-20 cannot be issued until you are accepted.*

PART II:

If you are currently living in the United States, complete this section. If not, skip to Part III.

What is your Immigration Status? \_\_\_\_\_

*Note: You can attend regardless of your INS status.*

F-1 \_\_\_ or M-1 \_\_\_

What is your SEVIS ID Number? \_\_\_\_\_

Check each of the following that indicates what your I-20 is for:

- \_\_\_ 1. Transferring/changing U. S. schools
- \_\_\_ 2. Changing educational level/program at Santa Ana Beauty College
- \_\_\_ 3. Reinstatement to F-1 or M-1 Status

PART III:

How do you want to get your I-20?

\_\_\_ MAIL:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_ HOLD FOR PICK-UP:

Name \_\_\_\_\_ Phone \_\_\_\_\_

PART IV: Your Statement of Financial Support

*Please complete this part after you have carefully read all instructions.*

What level of education will you be pursuing? \_\_\_\_\_

What will your major be? \_\_\_\_\_

What are your estimated annual costs from the annual cost worksheet? \_\_\_\_\_

*How will you support yourself for every year of your program of study? Please check off your means of support below and indicate how much will be provided or available to you every year:*

Source of My Support: Annual Amount \$ \_\_\_\_\_

\_\_\_\_\_ Personal Funds--the amount available to me from my own resources every year is \$ \_\_\_\_\_

(divide total amount by number of years in your program).

\_\_\_\_\_ Cash funds--from a sponsor to be given every year: \_\_\_\_\_

Sponsor's name \_\_\_\_\_

\_\_\_\_\_ Cash funds from a sponsor to be given every year: \_\_\_\_\_

Sponsor's name \_\_\_\_\_

Total amount available to me every year of study. This amount must be the same or more than your minimum annual costs. \$ \_\_\_\_\_

The following documents are enclosed to prove my financial responsibility:

My Personal Documents: \_\_\_ Bank Statement \_\_\_ Proof of Income

Cash Sponsor's documents: \_\_\_\_\_

*I understand that all three types of documents must be attached--affidavit of support; proof of income; and bank statements.*