

Request Form

Student's Name _____
Last First Middle

EMPL ID _____ Date of Birth _____ / _____ / _____
Month Day Year

Phone Number (_____) _____ E-mail _____

I am requesting:

- Change of Major
- Duplicate SEVIS Form I-20
- Extension of Program
- Graduation Invitation letter
- Invitation Letter to Visit
- Reduced Course Load
- SEVIS Form I-20
- Signature for Travel
- Social Security Number (Introduction Letter)
- Transfer Out

Employment:

- Academic Training (AT) Form DS-2019
- Curricular Practical Training (CPT) Form I-20
- On Campus Employment Authorization
- Optional Practical Training (OPT) Form I-20, beginning date _____ / _____ / _____ (must be within 60 days
Month Day Year of the last day of classes)
- Other _____

For invitation letters only:

Name of Relative _____ Relationship _____ DOB _____ / _____ / _____
Last First Month Day Year

Name of Relative _____ Relationship _____ DOB _____ / _____ / _____
Last First Month Day Year

Name of Relative _____ Relationship _____ DOB _____ / _____ / _____
Last First Month Day Year

Do you wish to have your letter addressed to the U.S. Embassy? _____ U.S. Consulate _____
If yes, in which country? _____

Signature

Date