



VCU Office of Admissions

VCU International Admissions
 408 West Franklin Street, P.O. Box 843012
 Richmond, Virginia 23284-3012
 Phone: (804) 828-6016; fax: (804) 828-1829

I-20/DS-2019 Request Form

Personal information

Please print your full name exactly as it appears on your passport or birth certificate. **We cannot issue your immigration document (I-20 or DS-2019) until we receive this form from you.** Please complete the form and attach all required documents. Return the form with your admissions application.

Applicant's name* _____

Last (family name)

First

Middle

Date of birth* _____

Month/day/year

City of birth _____

Country of birth* _____

Country of citizenship* _____

Country of legal permanent residence* _____

Email _____ Telephone _____ Fax _____

Foreign residence address* (NOTE: **This is required information**, even if you are currently living in the US)

U.S. Address (if applicable) _____

Current occupation (i.e., graduate student, researcher, etc.) _____

To which address would you like your I-20/DS-2019 mailed? Please circle one (U.S. or foreign address)

Previous or current VCU identification number (if known) _____

Student Type: __ Freshman __ Transfer __ Graduate



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Immigration Information

What type of immigration document are you requesting from VCU? I-20 (F-1 status) DS-2019 (J-1 status)

Please attach a copy of your passport identification page or if your passport is unavailable, a copy of your birth certificate.

Are you currently in the United States? Yes* No

**Please attach a copy of your current immigration document (Form I-20, DS-2019 or other) and I-94 card.*

If yes:

1. What is your current immigration status? F-1 J-1

Other: _____

2. If currently in F-1 or J-1 status, please list school or university you are attending.

3. Are you planning to leave the United States before coming to VCU? Yes No

4. If yes, when? _____

Dependents

If your family will accompany you, you must show evidence of an additional U.S. \$5,000 per year for your spouse and U.S. \$5,000 for each child. **For each dependent, please attach a copy of passport identification page or birth certificate.**

Please complete: I plan to come alone.

I plan to bring the following dependents who will enter the United States with me. (Complete below.)

The following dependents are currently with me in the United States and will remain with me.

Name _____

Last (family name)

First

Middle

Date of birth _____

Country of citizenship _____

City and country of birth _____

Country of legal permanent residence _____

(Please continue on separate sheet if needed.) Spouse Child

- You must demonstrate that you have sufficient funds available for your academic and living expenses.
- You or your sponsor will be responsible for all payments according to scheduled VCU payment dates for each semester.

Funding

All students requesting a DS-2019 or I-20 from VCU must provide proof of sufficient funding for academic and living expenses as well as health insurance. You or your designated sponsor will be responsible for all scheduled payments to VCU. Note that official and original financial documentation is required prior to issuing the I-20 or DS-2019. Documents that show students are potential candidates for scholarships are not acceptable. If your sponsor is paying your tuition, fees, room and/or board, your sponsor's billing authorization for payment must be unconditionally guaranteed and a copy of the billing authorization, which should include your student V number, must be provided by the student to the Student Accounting Department each semester. Payment is due by the due date indicated on the bill from the Student Accounting Department. The student is ultimately responsible for payment, should the sponsor default on their payment.



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VCU is required to review all financial documentation prior to issuance of an I-20 or DS-2019. Sufficient funding must be shown for the first year of study. The estimate of expenses on the VCU I-20 and DS-2019 is an approximation, and it is the student's responsibility to examine all expenses by viewing these pages from the VCU Office of Student Accounting:

<http://accounting.vcu.edu/tuition/calculator/>

Estimated costs are as follows for the 2016-2017 academic year (note that actual costs may vary by program and student lifestyle and do not include summer tuition and fees). The VCU Board of Visitors meets each May and reserves the right to change any and all tuition and fees. Funding source amounts listed are per year in U.S. dollars.

	Undergraduate*	Graduate (master's)	Graduate (doctoral)
Tuition and fees	\$29,378	\$25,271	\$22,034
Living expenses	\$10,000	\$10,000	\$10,000
Books/health insurance	\$ 2,000	\$ 2,000	\$ 2,000
Total estimate:	\$44,287	\$37,271	\$34,034

*Based 15 undergraduate credits

Official financial documents are required. This includes:

- An official scholarship letter from a valid sponsoring agency indicating a scholarship has been granted on the student's behalf to study at VCU.
- Official bank statements (checking, savings, certificates or deposit, or money market accounts only). **Real estate or property, corporate assets, insurance, or salary letters are not acceptable.** All official documents should be dated within 3 months.

Type	Amount
Personal funding	_____
Funding from parent or individual sponsor	_____
Funding assistance from VCU	_____
Government sponsor	_____
Private organization/employer	_____
Other (please specify)	_____
Total	_____

Further information on payment information is posted at <http://accounting.vcu.edu/tuition/payments/>

Applicant: I certify that the information provided is correct and complete. I will be responsible for adhering to all university tuition, fees, room and board, and health insurance payment schedules, including providing the Office of Student Accounting with Financial Guarantees in schedule with university policy. I also understand that I must keep a current active U. S. mailing address on file with the Office of Records and Registration and check my VCU official e-mail on a frequent basis. All bills are available on [VCU eServices](#) and should be reviewed and paid in accordance with university policy.

Signature of applicant	Date	Last Name (printed)	First Name	MI
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Parent/sponsor: I certify that I have read the information provided by the applicant on this form, and it is true, accurate and complete to the best of my knowledge, and that the funding is available as noted.

Signature of parent	Date	Last Name (printed)	First Name	MI
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Relationship to applicant	Address
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