

## Document Request Form



**REMINDER:** U.S. Citizenship and Immigration Service (USCIS) regulations state that students are responsible for keeping I-20s and DS-2019's current at all times. Students who allow these documents to expire are out of visa status, and are ineligible for immigration benefits such as employment authorizations.

Date of Request: \_\_\_\_\_

Student ID: \_\_\_\_\_

Gender:  Male  Female

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

### GENERAL DOCUMENT REQUESTED/SUBMITTED

Copy of I-20 or DS-2019  Replace Lost I-20 or DS-2019  Update Financial Guarantee or Sponsor

Letter of Enrollment for F-2  Letter of Enrollment for J-1  Letter of Enrollment for J-2

Please provide your current address: \_\_\_\_\_  
(Street) (City) (State + Zip code)

Letter of Program Participation  (J-1 Scholars)  F-1 Student  J-1 Student

Please provide your current address: \_\_\_\_\_  
(Street) (City) (State + Zip code)

### NEW I-20/DS-2019 REQUEST

<input type="checkbox"/> Begin a New Degree Program	Financial Document(s) required:	<input type="checkbox"/> Bank statement is required if privately funded <input type="checkbox"/> Funded by Missouri S&T <input type="checkbox"/> If sponsored by a government or private group, submit a letter from the sponsor detailing amount and duration of funding.
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<input type="checkbox"/> *Change of Academic Level <i>*Bank Statement is required</i>	<input type="checkbox"/> BS to MS <input type="checkbox"/> Master to PhD program <input type="checkbox"/> Update English Proficiency <input type="checkbox"/> PhD to Master Program <input type="checkbox"/> IEP to BS/MS/PhD (Circle One)
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Change of Major:

<input type="checkbox"/> Change of Financial Support Amount or Source: Please check box that applies: <i>*Bank statement may be required in either situation</i>	<input type="checkbox"/> Receive / terminate funding support from your academic department
	<input type="checkbox"/> Funding support increase / decrease from your academic department Name of department funding you: _____

<input type="checkbox"/> Correct Error in Biographic Information <i>i.e. – Name, date of birth (mm/dd/yyyy), or citizenship</i>	<input type="checkbox"/> Please provide the corrected information:
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Add Dependent  Remove Dependent *\*Please attach an extra sheet if there is more than one dependent*

Dependent's Information: Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Gender: Male / Female Relationship: \_\_\_\_\_ Date of Birth (mm/dd/yyyy): \_\_\_\_\_

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

- Financial statement requires an additional \$3,000 for spouse & \$1,500 for each child
- \*Copy of Marriage Certificate (Spouse)  \*Copy of Birth Certificate (Child)

**\*Both Marriage and Birth Certificates MUST be translated in English & require notarization\***

### CHANGE OF U.S. ADDRESS (ALI & J-1 ONLY)

Please provide your current address: \_\_\_\_\_  
(Street) (City) (State + Zip code)

### CHANGE OF HOME COUNTRY ADDRESS (ALI & J-1 ONLY)

Please provide your current address: \_\_\_\_\_  
(Street) (City) (State + Zip code) (Country)

### ESTIMATION COST LETTER

*\*If request is for a semester you are registered for, please request this letter from the Cashier's Office.*

If not registered, please provide semester(s) and number of hours you will be registered for: