

**Student Information Form
for Students Requesting I-20**

Family Name _____ First Name _____

Date of Birth _____ month _____ day _____ year

Country of Birth _____ Country of Citizenship _____

Program of Study _____

Home Country Address

Canadian Student Only:

Where will you be living while attending school?

_____ CANADA _____ UNITED STATES

Will you be attending school full-time or part-time?

_____ Full-time _____ Part-time

Contact person in the United States (if applicable). Please permit the contact person to handle my admission process including, but not limited to sending I-20

Name _____ Relationship to student _____

Address _____

Home Phone () _____ Work Phone () _____

(Student's Signature and Date)