

# Application for an I-20

Print this form and complete all relevant sections. You may send the application by mail to: International Programs, Eastern Illinois University, 600 Lincoln Avenue, Charleston, Illinois 61920. You may also fax your application to (217) 581-7207, though we ask that you only send your application by fax in emergency situations. Please note that we must receive all required documents in order to make your I-20, and it is your responsibility to ensure that we have received them. If you would like to check on the status of your application, you may call us at (217) 581-2321 or send an email to [interntl@eiu.edu](mailto:interntl@eiu.edu).

---

## Information about you:

### Your name:

First name \_\_\_\_\_

Last name \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_

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

Country of Citizenship \_\_\_\_\_

### Local address\*:

Street and Apartment Number \_\_\_\_\_

City \_\_\_\_\_

Zip Code \_\_\_\_\_

\* Have you updated your local address as required by INS regulations?

### Address in your home country:

Street Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone \_\_\_\_\_

Home phone: \_\_\_\_\_ Office phone: \_\_\_\_\_

Your EIU email: \_\_\_\_\_

Alternate email: \_\_\_\_\_

**Your current level of study:**

**Field of study:**

- 
- Bachelor's degree
  - Master's degree
  - Ph.D.
  - Non-degree
  - Other: \_\_\_\_\_
- 

**Information about your finances:**

**Number of F-2 dependents:** \_\_\_\_\_

**Sources of financial support:**

- Personal Funds \$ \_\_\_\_\_  total  
 monthly  yearly
- Family's Funds \$ \_\_\_\_\_  total  
 monthly  yearly
- Funds from another source \$ \_\_\_\_\_  total  
 monthly  yearly

Specify the source:

- 
- On-campus hourly employment \$ \_\_\_\_\_  total  
 monthly  yearly
  - Graduate assistantship \$ \_\_\_\_\_  total  
 monthly  yearly

- Length of your assistantship appointment:  9 months  11 months  
 12 months
- Will your assistantship appointment be renewed?  Yes  No
- Tuition waiver for:  Fall semester  Spring semester  Summer semester
- 

**The purpose of this I-20 is:**

- Conversion into SEVIS
- Extension of my F-1 status. Are you traveling outside of the U.S. also?  No  
 Yes Dates of travel \_\_\_\_\_

Additional required documents:

- [Academic Advisor's Certification Form](#)
- Change of field or level of study. Additional required document:  
 [Academic Advisor's Certification Form](#)

Possible additional documents:

- Approved Graduate College petition for a change of academic program
- Documentation of your finances as outlined in Section 2 on the front of this form

- Change of status to F-1. Additional required documents:  
 [Academic Advisor's Certification Form](#)  
 Documentation of your finances as outlined in Section 2 on the front of this form

- Replace a lost I-20

- Reinstatement to F-1 status. Possible additional required document:  
 [Academic Advisor's Certification Form](#)

