

## FORM B: I-20 / DS 2019 REQUEST BY PROSPECTIVE STUDENT

**DIRECTIONS:** Prospective UCSD students who will participate in exchange/academic programs at UCSD must complete this form. Submit all forms directly to the sponsoring department at UCSD. Please type or print clearly.

### SECTION 1: PERSONAL INFORMATION

NOTE: Write name as it appears in your passport biographical page (include a photocopy of your passport biographical page to this form):

**Name of Student:** \_\_\_\_\_  
(Family/Last Name) (First Name) (Middle Name)

**E-mail:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Permanent Address: (Your address in your home country.)**

\_\_\_\_\_  
(Street) (City) (Province) (Country) (Postal Code)

**Date of Birth:** \_\_\_\_\_ **Gender as listed on passport (select one):**  **Male**  **Female**  
(Example: January 1, 1985)

**City of Birth:** \_\_\_\_\_ **Country of Birth:** \_\_\_\_\_

**Country of Citizenship:** \_\_\_\_\_ **Country of legal permanent residence:** \_\_\_\_\_

**Position/Title/Occupation/Activity in Home Country:** \_\_\_\_\_

**Name of Employer/Academic Institution in Home Country:** \_\_\_\_\_

### SECTION 2: DEPENDENT INFORMATION

Please complete this section for any family members who will enter the U.S. in F-2 or J-2 status with you. If none, write "none." Only your legal spouse and unmarried children under age 21 may be included as family members. Please include photocopies of the passport biographical page for all family members.

Family Name	First Name	Relationship (husband/wife/ child)	Gender on passport (i.e. male or female)	Date of birth (i.e. Jan. 1, 2005)	City of Birth	Country of Birth	Country of Citizenship	Country of Permanent Residence	Dependent Email Address*

\*Please use parental email address if child does not have one.

**SECTION 3: US VISA HISTORY**

Are you currently in the USA?  Yes  No

If YES, please indicate your current visa status: \_\_\_\_\_

NOTE: Please attach a photocopy of all previous visa documents including Form I-94, DS-2019 form(s), I-20 form(s), EAD card(s), and/or I-797 approval form(s).

If YES, please check one:

I will leave the USA and return before I begin/resume my studies at UCSD.

Please give destination and travel dates: \_\_\_\_\_

I will request a transfer of my current visa status.

Name of Current Institution \_\_\_\_\_ SEVIS Release Date \_\_\_\_\_

I will request a change of visa status.

During the last two years, have you been in the USA in any J status?  Yes  No

If YES, please complete the following section. Begin with your most recent visa status and work backwards chronologically.

Visa Classification (school or institution)	Begin and End Dates in USA (i.e. Jan 1, 2020- Dec. 31, 2020)	Purpose of stay (i.e. student, scholar, researcher, etc...)	Location

**SECTION 4: FINANCIAL SUPPORT INFORMATION**

NOTE: All students must provide verification of financial support to cover all tuition, fees, and living expenses while studying in the USA. Minimum amount for living expenses is US\$2,400 per month for F-1/J-1 exchange visitor, US\$800 per month for first dependent, and US\$400 per month for each additional dependent. Written verification such as an original bank statement is required for financial support NOT provided by UCSD. Students sponsored by school, company, agency, foundation or government agency, must attach a letter from that sponsor specifying which costs will be paid.

<input type="checkbox"/>	<b>University of California, San Diego</b> (includes government grants to UCSD)	\$ _____ per month X ____ months=\$ _____
<input type="checkbox"/>	<b>US Government Agency</b> (includes grants given directly to visitor for international exchange)	\$ _____ per month X ____ months=\$ _____
<input type="checkbox"/>	<b>Student's Home Government</b>	\$ _____ per month X ____ months=\$ _____
<input type="checkbox"/>	<b>Other (please specify):</b> _____	\$ _____ per month X ____ months=\$ _____
<input type="checkbox"/>	<b>Personal Funds</b> (attach original copy of bank statement)	\$ _____ per month X ____ months=\$ _____
<b>TOTAL = \$</b>		_____

**SECTION 5: STUDENT CERTIFICATION**

- US government regulations require that all participants in J-1 exchange visitor status (and J-2 dependents) purchase adequate health insurance as defined by the Department of State. You must sign the Health Insurance Requirement Form and either enroll in or obtain a waiver for adequate health insurance for you and any dependents.
- Attend an orientation session with the International Students & Programs Office within 15 days of arrival.
- The International Students & Programs Office must validate your SEVIS record within 30 days of the start date of your program. Notify your department if your arrival will be delayed.
- Notify the International Students & Programs Office upon your departure from UCSD or if any of your dependents depart the U.S. permanently earlier than you do.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SECTION 6: TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISOR**

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_