



F-2 DEPENDENT I-20 REQUEST

F-1 visa status students may request an I-20 for a non-US citizen spouse or children under 21 years of age.

Submit this form to OIA with:

- Photocopy of each dependent's passport biographical page
- Evidence of proof of financial support for your dependent

SECTION A: STUDENT INFORMATION

Last Name:	<input type="text"/>	First Name:	<input type="text"/>
Student ID Number:	<input type="text"/>	Email:	<input type="text"/>

SECTION B: DEPENDENT INFORMATION

List the information below as it appears in your dependent's passport. Attach a separate page to add more dependents.

DEPENDENT 1

Last Name:	<input type="text"/>	First Name:	<input type="text"/>
Middle Name:	<input type="text"/>	Relationship:	<input type="checkbox"/> Spouse <input type="checkbox"/> Child
Birth Date (mm/dd/yyyy):	<input type="text"/>	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male
Country of Citizenship:	<input type="text"/>	Country of Residence:	<input type="text"/>
Country of Birth:	<input type="text"/>	City of Birth:	<input type="text"/>
Email Address:	<input type="text"/>	Phone:	<input type="text"/>

DEPENDENT 2

Last Name:	<input type="text"/>	First Name:	<input type="text"/>
Middle Name:	<input type="text"/>	Relationship:	<input type="checkbox"/> Spouse <input type="checkbox"/> Child
Birth Date (mm/dd/yyyy):	<input type="text"/>	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male
Country of Citizenship:	<input type="text"/>	Country of Residence:	<input type="text"/>
Country of Birth:	<input type="text"/>	City of Birth:	<input type="text"/>
Email Address:	<input type="text"/>	Phone:	<input type="text"/>

SECTION C: FINANCIAL SUPPORT

Below is the required minimum financial support for each dependent. This amount is in addition to the required financial support for the primary F-1 visa holder.

Spouse:	<input type="checkbox"/> \$5,000.00	Number of Dependent Children Requested:	<input type="text"/>
Child:	<input type="checkbox"/> \$2,500.00 per child		

STUDENT SIGNATURE: I certify the information provided on this form is true and correct.

Signature:	<input type="text"/>	Date:	<input type="text"/>
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