

GUIDELINES FOR OBTAINING A SEVIS FORM I-20

INITIAL ATTENDANCE (Overseas)

Please provide item 1 to 6

- 1. Application for the Immigration Certificate of Eligibility (Form I-20)
- 2. Declaration & Certification of Finances
- Proof of Financial Evidence (Copy):
 Admission is for a period of two academic years (\$41,000) unless otherwise indicated for one year

(\$21,000):

- Student's bank statement showing the transactions of the past 3 months in English (saving or checking)
 or/and
- Affidavit of Support with evidence of income and resources (please refer to the "Sponsor Supporting Evidence" page for details)
- 4. High school or college graduation diploma (Must be translated in English and notarized)
- 5. Passport (copy)
- 6. Commitment deposit: \$100 (Check or Money Order payable to "QCC". This non-refundable deposit will be credited in full to your tuition bill if you enroll in the program for the upcoming semester)

TRANSFER

other than the above 6 items, you must also provide item 7 & 8

- 7. F-1 Student Status Verification Form (Transfer Form)
- 8. Visa, I-94 online printout & all previous I-20s (Copy)

CHANGE OF STATUS

Please provide item 1 to 6 & 9 to 10

- 9. Visa, I-94 online printout
- 10. I-539 form (Please consult program staff for further information)
- 11. Student written statement explaining the reason of change of status
- 12. \$370 application fee by check or money order payable to United States Department of Homeland Security

REINSTATEMENT

Please provide item 1 to 6, item 8, 10 & 11

13. Student's written statement and supporting evidence

Student may also have to provide further evidence as determined on a case-by-case basis. Please mail or submit the above documents to the Port of Entry Program Department at the Science Building, Room 108, Queensborough Community College, 222-05 56th Avenue, Bayside, NY 11364. We can also be reached through POE@qcc.cuny.edu or at (718)281-5410 and 718-640- 9200. Visit us at www.QCC.CUNY.edu/POE



Application for the Immigration Certificate of Eligibility (Form I-20)

International students who are admitted into Port of Entry English program at QCC will need to obtain an Immigration Certificate of Eligibility (Form I-20), in order to enter and/or remain in the U.S. as an F-1 student. This requirement applies whether you are a new student, a transfer student from another U.S. university, or a student transferring between CUNY colleges. (Please type or print clearly with a pen)

			• •			•	
1	NAME as in passport		E' (M		G 1:	.111	☐ Male ☐ Female
		Surname	First Name	,	Second give	en, or middle name	Sex
2	PRIMARY RESIDENCE						
	(Address)	Number and Street	City, S	tate	Count	try	Postal Code
3	CONTACT INFORMATION						
		Cell Phone	Fax Nu	mber		Email	
4	DATE OF BIRTH		Place of				
		Month/Day/Year	Birth (City and Country	1		
5	COUNTRY						
		Country(ies) of Citizenship		Country o	f Residence		
6	PERMANENT OVERSEAS						
	ADDRESS	Number and Street		City, State	(Country	Postal Code
7	MAILING ADDRESS IN					_	
	U.S.A. (if known)	Number and Street		City, State		Country	Postal Code
8	EXPECTED SEMESTER OF ENROLLMENT	☐ Fall 20 ☐ Sprin ☐ Summer 20	ng 20		GRAM STUDY	Port of Entry Englis	sh Program
10	DID YOU COMPLETE HIGH SCHOOL?	☐ Yes ☐ No III ARE YOU CONTROL STUDYING ANSTITUTIO		Yes No		OO YOU CURRENT IOLD F-1 STATUS?	
	TO BE COMPLETED BY APPLICANTS ALREADY IN THE U.S.						
with	If you are currently in the U.S., please indicate your immigration status. Attach a copy of the passport pages with the passport number, expiration date of passport, and the U.S. visa stamp. Include copies of both sides of Form I-94 for yourself and accompanying family members.						
13	13 F-1 STUDENT STATUS Yes No CURRENTLY IN STATUS (Attach copies of ALL your previous I-20s)						

13	F-1 STUDENT S	TATUS Y	es \square No	CURRENT IN STATU			LL your previous I-	20s)
14	- ' ' '	THAT ISSUE ENT FORM I-2				SEVIS#		
15	CURRENT U.S. SCHOOL	Name		Address: Num	aber and Street	City	State	ZIP Code
16	OTHER IMMIGRA (IF APPLICABLE, S							
17	I-94 ADMISSIO NO.	N			I-94 EXPIR	ES ON	Month/Day	/Year

Declaration & Certification of Finances

Please indicate the source and amount of your financial support for the first three years of study at Queensborough Community College, for the college requires documentation of guaranteed support for the first year and projected support for future years. Note that costs may rise every semester. Total amounts must meet or exceed the estimate of expenses (see "Sponsor Supporting Evidence" page).

U.S. immigration authorities require colleges to receive satisfactory financial certifications from prospective students before issuing a Form I-20. Therefore, you must attach a copy of the original documents for each source of financial support you indicate. Please refer to the "Sponsor Supporting Evidence" page for a list of acceptable supporting documents. Be sure to have an additional set of original documents for your appointment at the U.S. Consulate (or Embassy) overseas.

Complete and send in this page with your application. Provide as much detail as possible. Please type or print clearly with a pen.

SOURCES OF FINANCIAL SUPPORT (Amount in U.S. Dollars)

	`	,			Guaranteed	Projected
A	STUDENT	(if Self-Sponsor)			Support Yr.1	Support Yr.2
A	STODENT	(ii Seii-Spoilsoi)			\$	\$
	Name (as in passport)					
	The student must provide the following docu			summary		
	statement of account history signed and stan	aped by bank offic	er.		1	
	Name of bank (if self-sponsor)	Location	City	Country		
В	NAME OF SPOUSE AND CHILDREN ACCO	MPANYING/FOL	LOWING TO J	OIN PERSON		1.
					\$	\$
	Spouse (as in passport)	Sex		Age		
]	
		G.				
	Child (as in passport)	Sex	K .	Age		
	Child (as in passport)	Sex	(Age		
~	Child (as in passport)	Se		Age	<u> </u>	
C	PARENTS, AND/OR OTH	HER INDIVIDUAL	SPONSORS		\$	\$
					Ψ	Ψ
	Name		Relationship	to Student		_
					\$	\$
	Name		Relationship to	o Student		
D	GOVERNMENT, UNIVE	RSITY, OR OTHE	R SPONSOR		\$	\$
					J.	, s
	Source					
					\$	\$
	Source					
	(Attach current signed official copy of the term	s of sponsorship, in	cluding amount	of support in		
	U.S. dollars and period covered.					
	GRAN	D TOTALS			\$	\$

THE COLLEGE CANNOT ISSUE A FORM I-20 UNTIL YOU MEET ALL REQUIREMENTS FOR FINANCIAL DOCUMENTATION.

By signing my name to this form, I certify that the information above is a correct statement of my arrangements for financing my studies

Oueensborough Community College of The City University of New York.

	Queensoorough community contege of the city of the total.	
Student's Signature		Date: (Month/Day/Year)
Student's Name (Print)		

AFFIDAVIT OF SUPPORT

This form is for individuals using their own income and/or savings to support a student. It must be completed by the person who will provide the student with full or partial financial support and/or room and board during the student's course of study at Queensborough Community College of The City University of New York.

	SPONSOR INFORMATION					
	I.	citizen of	citizen of			
	I,(Name of sponsor)		, ••••••••••••••••••••••••••••••••		(Country/ies)	
1	and residing at					
	(Street)	(City/State)	(Country)	(Postal Code)	(Telephone)	
	I am employed with				located at	
	Tam employed with		(Name of employer)		iocatea at	
2	(Street)	(City/State)	(Country)	(Postal Code)	(Telephone)	
	I receive an annual income of \$	(U.S	S) from this employmen	nt Attach veri	fication of annual	
	income (e.g., paystubs, record of re					
	English or come with a certified tra	nslation.				
	I have \$(U.S.) on deposit with				
		_				
3	Name of Bank:					
	Address of Bank:					
	1)	Number and Street)	(City)	(State)	(Postal Code)	
4a	I currently support	persons (including n	nyself). My total annual	l income is \$ _	(U.S.).	
	My total annual expenses are \$	(U.S.).				
4b			ation in addition to this	offidovit		
	I sponsor (number) individuals for immigration in addition to this affidavit. STUDENT SUPPORT INFORMATION					
	TP1: CC:1 :.:				C/I ·	
_	This affidavit is executed on behalf	(Name of Student)		on (Month/ Day	S/ne is my	
5		(Traine of Stadent)		(Wollan Bu)	, 1 cm)	
	(Relationship to Sponsor)					
	I hereby certify that I am willing, a					
6	\$ (U.S.) for her/hi					
	study at Queensborough Communi sponsorship is expected to terminal		tıl	(give a	a date when the	
R	OOM AND BOARD SUPPORT INFO		ompleted if student will liv	ve in the sponsor	r's home in the U.S.)	
			•	•	. o nom o m mo o .s.).	
	I hereby certify that I will provide	(Name of Student)	with (check one	e):		
7	Doom only in my house of the co		a (malmad at \$12,049) O	JD.		
,	□ Room only in my home at the ac □ Full room and board in my home				hat s/he follows a	
	program of study at Queensboroug			ng caen year t	nat 5/110 10110 W 5 a	
		SIGNAT	CURE			
	By signing my name to this affiday	•	nformation above is a co	orrect statemer	nt of my agreement	
	to sponsor the student herein named.					
	Signature of sponsor				Month/Day/Year	
	Name of Sponsor (Print)					
	Traine of Sponsor (1 lint)					



Port of Entry Program

SPONSOR SUPPORTING EVIDENCE

In a	In addition to the attached Affidavit of Support, the sponsor must submit evidence of income						
and	and resources, as appropriate:						
	Bank s	tatement that includes the following information:					
	1.	Account holder's name and account number					
A	2.	Transaction history for the past three months					
	3.	Present balance					
	~						
		or Employment verification:					
В		Last three months of paystubs (pay voucher)					
	2.	Last three months of bank account transaction history showing regular deposits					
	Additio	onal documents required (if applicable):					
C	1.	Copy of last income tax return filed (if required in your country)					
C	2.	Commercial license or registration (if self-employed)					
	3.	Copy of lease/mortgage/renter's agreement (if providing room and board)					
Sponsor in the United States must provide one of the following:		or in the United States must provide one of the following:					
D	1.	U.S. Passport					
D	2.	U.S. Certificate of Naturalization					
	3.	Permanent Resident Card					

Estimate of 2017-18 Expenses for International Students Attending the City University of
New York

Tuition and fees per academic year (12 mon......\$4,825.00*

Student Living Expenses

Books and supplies	\$480.00
Transportation	\$772.20
Personal Expenses	\$4,510.00
Housing	\$6,600.00
Meals (at home)	
Lunch	\$712.80
Total Student Living Evnences	\$15,667,00

Total Student Living Expenses......\$15,667.00

Total Annual Expenses......\$20,492.00

Tuition and fees may rise every semester. Student must attend the full-time academic program to maintain lawful immigration status.



Port of Entry Program

F-1 STUDENT TRANSFER ENROLLMENT STATUS FORM

U. S. Citizenship & Immigration Services requires this office to have the following information in order to process your transfer. After you have completed Section 1, **please submit this form to the International Student Advisor** at the last school you attended before you were accepted to this program.

Section 1 – TO BE COMPLETED BY	Y STUDENT	
		ensborough Community College for the
		below to be forwarded to Queensborough
Community College's Office of Intern	national Student Affairs.	_
LAST NAME, FIRST NAME	DATE OF BIRTH	SOCIAL SECURITY #
COUNTRY OF BIRTH	I-94 #	SEMESTER REQUESTED
		□ Fall 20
		☐ Spring 20
		☐ Summer 20
STUDENT SIGNATURE		DATE
Section 2 – TO BE COMPLETED BY		
		Entry Program at Queensborough
Community College for the term i	ndicated. Please complete	Section 2 and return this letter to the
Port of Entry Program Office by m	nail (Queensborough Comn	nunity College, S-108, 222-05 56
Avenue, Bayside, NY 11364) or by	/ fax. In the SEVIS System, Que	eensborough Community College is
located under THE CITY UNIVERSITY	OF NEW YORK. (NYC214F008	12016)
SEVIS ID #	SEVIS RELEA	•
1. Student was / was NOT a	authorized to attend our scho	ool according to Immigration regulations.
		ratus the precedingterm,
(year).	,	,
	/ (MM/DD/YY) to	/(MM/DD/YY)
		taining status the preceding term (or the
		s before transferring the student out in
the SEVIS if reinstatement is ne		s serore transferring the stadent sat in
		Notification Procedure: YES / NO
Comments:	engible for transfer affact i	votification i roccadic. 123_7 ivo
comments.		
		·
Signature of Designated School Office	cial:	_ Date:
Name of DSO (Please Print)	Т	itle:
Name of Institution:	Phone:	Fax:

_E-Mail: _____