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
3. 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: $150 ((Visa/Master card, 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 (Not applicable to B1/B2 holders)
Please provide item 1 to 6 & 9 to 12

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. $420 online application fee; Or, $470 paper filing fee by check or money order payable to United States Department of Homeland Security

REINSTATEMENT
Please also provide item 1 to 6, item 8, 10, 12 & 13

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 submitthe above documents to the Port of Entry Program Department at the Science Building, Room 216, 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. Visit us at www.QCC.CUNY.edu/POE

QUEENSBOROUGH COMMUNITY COLLEGE CUNY

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	Surname	First Name	Second given, or middle name	☐ Male ☐ Female Sex
2	**PRIMARY RESIDENCE** (Address)	Number and Street	City, State	Country	Postal Code
3	**CONTACT INFORMATION**	Cell Phone	Fax Number	Email	
4	**DATE OF BIRTH**	Month/Day/Year	Place of Birth	City and Country	
5	**COUNTRY**	Country(ies) of Citizenship	Country of 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_____ ☐ Spring 20_____ ☐ Summer 20_____	9	**PROGRAM OF STUDY**	Port of Entry English Program		
10	**DID YOU COMPLETE HIGH SCHOOL?**	☐ Yes ☐ No	11	ARE YOU CURRENTLY STUDYING AT A U.S. INSTITUTION OR COLLEGE?	☐ Yes ☐ No	12	DO YOU CURRENTLY HOLD F-1 STATUS? ☐ Yes ☐ No

TO BE COMPLETED BY APPLICANTS ALREADY IN THE U.S.

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	**F-1 STUDENT STATUS**	☐ Yes ☐ No	**CURRENTLY IN STATUS**	☐ Yes ☐ No (Attach copies of ALL your previous I-20s)
14	**UNIVERSITY THAT ISSUED MOST RECENT FORM I-20**		**SEVIS #**	
15	**CURRENT U.S. SCHOOL**	Name	Address: Number and Street	City / State / ZIP Code
16	**OTHER IMMIGRATION STATUS (IF APPLICABLE, SPECIFY TYPE**			
17	**I-94 ADMISSION NO.**		**I-94 EXPIRES 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 Support Yr.1	Projected Support Yr.2
A	**STUDENT (if Self-Sponsor)**		
		$	**$**
	Name (as in passport)		
	The student must provide the following document in English: a bank officer's summary statement of account history signed and stamped by bank officer.		
	Name of bank (if self-sponsor) Location City Country		
B	**NAME OF SPOUSE AND CHILDREN ACCOMPANYING/FOLLOWING TO JOIN PERSON**		
		$	$
	Spouse (as in passport) Sex Age		
	Child (as in passport) Sex Age		
	Child (as in passport) Sex Age		
	Child (as in passport) Sex Age		
C	**PARENTS, AND/OR OTHER INDIVIDUAL SPONSORS**		
		$	$
	Name Relationship to Student		
		$	$
	Name Relationship to Student		
D	**GOVERNMENT, UNIVERSITY, OR OTHER SPONSOR**		
		$	$
	Source		
		$	$
	Source		
	(Attach current signed official copy of the terms of sponsorship, including amount of support in U.S. dollars and period covered.		
	GRAND 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 Queensborough Community College of The City University of New York.

	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

1

I,_____, citizen of_____,
(Name of sponsor) (Country/ies)

and residing at_____
(Street) (City/State) (Country) (Postal Code) (Telephone)

2

I am employed with_____located at
(Name of employer)

_____
(Street) (City/State) (Country) (Postal Code) (Telephone)

I receive an annual income of $_____(U.S.) from this employment. Attach verification of annual income (e.g., paystubs, record of regular bank deposits). The verification of annual income must be written in English or come with a certified translation.

3

I have $_____(U.S.) on deposit with

Name of Bank: _____

Address of Bank: _____
(Number and Street) (City) (State) (Postal Code)

4a

I currently support_____persons (including myself). My total annual income is $_____(U.S.).

My total annual expenses are $_____(U.S.).

4b

I sponsor (number) individuals for immigration in addition to this affidavit.

STUDENT SUPPORT INFORMATION

5

This affidavit is executed on behalf of_____who was born on_____. S/he is my
(Name of Student) (Month/ Day /Year)

_____
(Relationship to Sponsor)

6

I hereby certify that I am willing, able, and do commit to provide_____with the annual amount of $_____(U.S.) for her/his tuition, fees, and/or living expenses each year during the entire program of study at Queensborough Community College CUNY until_____(give a date when the sponsorship is expected to terminate).

ROOM AND BOARD SUPPORT INFORMATION (To be completed if student will live in the sponsor's home in the U.S.).

7

I hereby certify that I will provide_____with (check one):
(Name of Student)

☐ Room only in my home at the address indicated above (valued at $6,600) OR
☐ Full room and board in my home as indicated above (valued at $9,192) during each year that s/he follows a program of study at Queensborough Community College CUNY.

SIGNATURE

By signing my name to this affidavit, I certify that the information above is a correct statement of my agreement to sponsor the student herein named.

_____
Signature of sponsor Month/Day/Year

Name of Sponsor (Print)_____

QUEENSBOROUGH COMMUNITY COLLEGE CUNY

Port of Entry Program

SPONSOR SUPPORTING EVIDENCE

In addition to the attached Affidavit of Support, the sponsor must submit evidence of income and resources, as appropriate:

A	Bank statement that includes the following information: 1. Account holder's name and account number 2. Transaction history for the past three months 3. Present balance
B	Sponsor Employment verification: 1. Last three months of paystubs (pay voucher) 2. Last three months of bank account transaction history showing regular deposits
C	Additional documents required (if applicable): 1. Copy of last income tax return filed (if required in your country) 2. Commercial license or registration (if self-employed) 3. Copy of lease/mortgage/renter's agreement (if providing room and board)
D	Sponsor in the United States must provide one of the following: 1. U.S. Passport 2. U.S. Certificate of Naturalization 3. Permanent Resident Card

Estimate of Annual Expenses for International Students Attending the City University of New York

Tuition and fees per academic year (12 months).....**$5150.00****

Student Living Expenses

Books and supplies…	$480.00
Transportation….	$772.20
Personal Expenses…	$4,510.00
Housing	$6,600.00
Meals (at home)	$2,592.00
Lunch…	$712.80
Total Student Living Expenses…	**$15,667.00**

Total Annual Expenses..... $20,817.00

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

Science Building Room 216, 222-05 56th Avenue, Bayside, NY 11364

Tel: 718. 281-5410; Fax: 718. 281-5069; Email: poe@qcc.cuny.edu

QUEENSBOROUGH COMMUNITY COLLEGE | CUNY

CENTER FOR INTERNATIONAL AFFAIRS, IMMIGRATION, AND STUDY ABROAD

F-1 STUDENT TRANSFER ENROLLMENT STATUS FORM

U.S. Citizenship and Immigration Services (USCIS) requires this office to have the following information in order to process your transfer to Queensborough Community College (QCC). After you have completed Section 1, **please submit this form to the Designated School Official (DSO)** of your current school.

Section 1 - TO BE COMPLETED BY STUDENT

I have been admitted to QCC and I grant permission for the information below to be forwarded to QCC's Center for International Affairs, Immigration, and Study Abroad.

Surname _____ First Name _____ DOB _____ Country of Birth _____

I-94 Number _____ Semester of Admission ◯ Spring ◯ Summer ◯ Fall _____(year)

Social Security Number (if applicable) _____ Signature _____ Date _____

Section 2 – TO BE COMPLETED BY DESIGNATED SCHOOL OFFICIAL

The above-named student has been admitted to QCC for the term indicated. In accordance with immigration regulations, we cannot process a student's SEVIS record transfer until determining whether s/he has been maintaining status for the preceding term. Please complete Section 2 and return the form to our office. **Queensborough Community College's SEVIS campus code is NYC214F00812016.**

Student's SEVIS ID Number _____ Release Date _____

The above-named student

- ☐ was authorized to attend our school according to immigration regulations.
- ☐ was **NOT** authorized to attend our school according to immigration regulations.
- ☐ was maintaining status the preceding term.
- ☐ was **NOT** maintaining status the preceding term. Student must apply for reinstatement with USCIS.
- ☐ has been granted work authorization (OPT, CPT, other) from _____ to _____.
- ☐ is in my opinion eligible for transfer under Notification Procedure.

Comments _____

_____

Name _____ Title _____

Signature _____ Date _____

Name of Institution _____ Telephone _____

Address _____ Email _____

PHONE: (718) 631-6611 · FAX: (718) 281-5140 ·poe@qcc.cuny.edu· 222-05 56th Avenue, L-431 Bayside, NY 11364-1497