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Please consult with an International Student Advisor before considering reinstatement to studentlastatesel

## Obtaining an Initial I20 from CSUEB

To obtain an-20, please submit the following to CIE:

Xinitial I-20 Request Form ~ % P î ~ ï •

XVerification of Funds (bank statement or letter)

Werification of Remaining Requirements

- x Graduate studentæmail verification from your major advisor
- x Undergraduate students mail verification from your major advisor and GE advisor (Sam Tran)

### Procedure:

Once you have your new Initia20 from CIE, you must do the following

- 1. <u>SEVIS Fe</u>gou must paythe SEVIS fefor your new Initial 1/20. The easiest way to pay is onlinew(w.fmjfee.com).
  - a. Please print and keep a copy of your receipt.
- 2. <u>Visa Appointment you must schedule a visappointment at U.S Embassy, preferably in your home country, obtain a new F1 visa</u>
  - a. You will have to follow the instructions given the embassy website regarding timing and documentation required.
    - x Please check with your U.S. Embassy if you are required to obtain a ritewista if your current fl visa is valid
- 3. Return DateYou are not allowed to return to the USA until 30 days ptroothe start of the program date listed on your I-20.
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- ñ XCheck In with CIE- upon your return to the USA, you must check in with CIE with 10 days.
  - x If you do not check in with CIE, a hold will be placed on yaccrount.

#### Notes:

- ò XA new initiall-20 will create a new immigration record for you. This will not affect your academic record.
- ó XYou must enrollin a full course of study for at least 2 semesters (Fall anhotenmation Patri) Programs



# Initial I-20 Request Form

Please complete this form to request an InitialDifrom CSUEB.

## **Student Information**

Family/Last Name:	First Name:
NETID:	Email:
City of Birth	Date of Birth:
Country of Birth:	Country of Citizenship:
U.S. Phone #:	Term which you will return for:
Home Country Addre≰snclude street number & name, city, state, postal code, country)	
USAddress (include street number, street name, apæthtnumber(if applicable,)city, state, zip)	

# Initial I-20 Statement of Understanding

I have read and agree to the following

x I understand that by requesting an Initia20, I am requesting a neimmigration record. This

