



## I-20 Certificate of Eligibility Application

International students need an I-20 to obtain the F-1 visa **AND** the F-1 non-immigrant status. The <u>F-1 visa</u> is needed to legally <u>enter the U.S.</u> for the sole <u>purpose of study</u>. The <u>F-1 non-immigrant status</u> is needed to <u>temporarily stay in the U.S.</u> to earn a degree or engage in English as a Second Language (ESL) training.

### To apply, complete and submit:

- Copy of Lehman College acceptance letter
- Completed I-20 Application Form
- Completed/Signed Financial Sponsor Affidavit of Support Form. <u>Attach</u>: Sponsor(s) bank statements & proof of employment (official employer's letter or copy of most recent tax returns/statements). If you are living with your sponsor, <u>also attach</u> a copy of your sponsor's lease or a bill with his/her address on it.
- Copy of your biographical passport page (photo, passport #, expiration date, country of birth, etc.)
- Copy of your dependent(s) biographical passport page(s)

### F-1 students transferring from another U.S. institution, also submit:

- Completed SEVIS Transfer Release Form (<u>Download Form</u>)
- Copies of all I-20s issued by previous US colleges and universities.
- I-94 Admissions/Departure record (www.cbp.gov/i94)
- Copy of F-1 Student Visa(s)
- Copy of F-1 Change of Status Approval (I-797), only if applicable.
- Copies of Dependent(s) I-20s, I-94 & F-2 Visa
- Copy of F-2 Dependent Change of Status Approval (I-797), only if applicable.
- Copy of OPT Employment Authorization Card(s) (EADs).

#### SUBMIT COMPLETED FORMS AND DOCUMENTS TO:

International Student & Scholar Office, Shuster Hall, Room 210 250 Bedford Park Blvd. West, Bronx, NY 10468.



SEE I-20 MAILING/ PICK-UP OPTIONS ON I-20 APPLICATION FORM, ITEM #7

Have questions?

Email: isso.shuster@lehman.cunv.edu

Visit: www.lehman.edu/isso

# **I-20 Application Form**

| 1  | NAME<br>(Passport)                                    |   |  |       |  |        |                             | Male   |
|----|---|---|--|-------|--|--------|-----------------------------|--------|
|    |   |   |  |       |  |        |                             | Female |
|    |   | Last name   | Last name First Name Second Given or Middle Name |       | dle Name                                       | Gender |                             |        |
| 2  | DATE<br>OF  |   | COUNTF   | RY    |  |        |                             |        |
|    | BIRTH   | Month/Day/Year  |  |       | City and Country of Birth                      |        |                             |        |
| 3  | COUNTRY   | ·   |  |       |  |        |                             |        |
|    |   | Country of Citizenship  |  |       | Country of Permanent Residence                 |        |                             |        |
| 4  | HOME COUNTRY<br>ADDRESS                               |   |  |       |  |        |                             |        |
|    |   | Number and Street   | City, Sta  | te    | Country  |        | Postal Code                 |        |
| 5  | CONTACT<br>INFORMATION                                |   |  |       |  |        |                             |        |
|    |   | Cell Phone  | Home Cou<br>Phone                                |       | Email  |        |                             |        |
| 6  | US ADDRESS  |   |  |       |  |        |                             |        |
|    |   | Number and Street   | eet City, State                                  |       | Country  |        | Postal Cod                  | е      |
|    | I-20<br>MAILING/PICK-UP<br>OPTIONS<br>SELECT ONE ONLY | Mail to my US address listed above via US postal mail                     |  |       |  |        |                             |        |
| 7  |   | Mail to my home country address via US postal mail                        |  |       |  |        |                             |        |
|    |   | I will make arrangements with an express mail carrier to pick up the I-20 |  |       |  |        |                             |        |
|    |   | A representative or myself will pick up the I-20                          |  |       |  |        |                             |        |
|    | SEMESTER OF ENROLLMENT & LEVEL OF STUDY               | Fall 20 Bachelor's Degree   |  |       | e FIELD  |        |                             |        |
| 8  |   | Spring 20   | g 20 Master's D                                  |       | Degree 9 ST                                    |        |                             |        |
|    |   | Summer 20   | Certificate /                                    | Other |  |        |                             |        |
| 10 | NUMBER<br>OF  |   |  |       |  |        |                             |        |
|    | DEPENDENTS<br>ACCOMPANYING                            |   |  |       | NAME<br>OF                                     |        |                             |        |
|    | YOU   |   | 12   |       | ALL DEPENDENTS ACCOMPANYING YOU                |        |                             |        |
| 11 | ALL<br>DEPENDENTS<br>ATTACH                           | Spouse and Children's<br>Passport pages                                   |  |       |  |        |                             |        |
|    |   | Children's Birth Certificate  |  |       |  |        |                             |        |
| 13 | ALL<br>APPLICANTS<br>ATTACH                           | Сору  | F1's   | Сору  | by of I-94 & F-1 Visa                          |        |                             |        |
|    |   | Lehman  | ransferring<br>from<br>IS Colleges               | Сору  | Copy of I-20 From Last School US IMMIG         |        | LIST CURR US IMMIGRA STATUS | ATION  |
|    |   | Acceptance<br>Letter  | ALSO<br>ATTACH                                   | SEVI  | EVIS Transfer Release Form (e.g.: B-2, E-1, F- |        |                             |        |

## **Financial Sponsor Supporting Evidence for Undergraduate Students**

U.S. immigration authorities require colleges to receive satisfactory financial certifications from students and their financial sponsors, before issuing the Form I-20. By completing and signing the **Financial Sponsor Affidavit Form**, all sponsors are accepting the responsibility and are held accountable for covering the student's fees and living expenses throughout his/her period of studies at Lehman College. Sponsor(s) must show sufficient income and financial resources to ensure the student will not become a public charge (receive U.S. Federal or State benefits or services).

A family member or friend can be a financial sponsor. A student can also self-sponsor. All sponsors must show enough funds in their account(s) to cover the student's first year expenses (**see table below**)\*.

Each sponsor is required to complete a **Financial Sponsor Affidavit of Support Form**.

**Sponsor(s)** must submit evidence of the following income and resources:

- 1. Bank statements: Savings, Checking, and/or Brokerage Accounts
  - Date account(s) opened
  - Current balance for each account

### 2a. Employer Letter or Copy of Most Recent Tax Return/Statement

- Employer letter should be on employee letterhead and include: Names, Occupation, Physical Address, phone and email.
- Dates of employment
- Job Title/Position
- Salary paid
- Whether the position is temporary or permanent
- Supervisors signature and contact information

or

### 2b. Business Owners, Independent Contractor and Self-employed are required to submit:

- Copy of last income tax return
- Certificate of Ownership
- Business Bank Statement

#### Annual Estimated Expenses for Lehman College, CUNY International Undergraduate Students

| Tuition and Fees per academic year (9 months)      |             |  |  |  |
|--|-------------|--|--|--|
| * Tuition  |             |  |  |  |
| Fees (Technology, Student Activities, Consolidate) | \$ 650.00   |  |  |  |
| Total Tuition & Fees                               |             |  |  |  |
| Student Living Expenses                            |             |  |  |  |
| ** Housing (Room)                                  | \$14,850.00 |  |  |  |
| Utilities & Meals at home (Board)                  | \$ 2,950.00 |  |  |  |
| Total Full Room & Board                            | \$17,800.00 |  |  |  |
| Lunch  | \$ 1,650.00 |  |  |  |
| Personal Expenses                                  | \$ 5,850.00 |  |  |  |
| Transportation                                     | \$ 1,450.00 |  |  |  |
| Books and Supplies                                 | \$ 1,900.00 |  |  |  |
| Total Student Living Expenses                      |             |  |  |  |
| Total First Year Expenses                          | \$44,180.00 |  |  |  |

<sup>\*</sup> Tuition and Fees stated are based on students taking at least 12 credits per semester. This is the minimum number of credits required to be a full-time student and necessary to maintain lawful immigration status. If you take more than 12 credits, you will be charged at the rate of \$620 per credit. Tuition and fees are set by the CUNY Board of Trustees and may change without notice.

<sup>\*\*</sup> For each dependent, add \$7,000 to the Total Student Living Expenses.

# **Financial Sponsor Affidavit of Support Form**

| SPONSOR INFORMATION |   |   |   |                     |  |  |  |  |  |
|---------------------|---|---|---|---------------------|--|--|--|--|--|
|                     | I,, citizen of  |   |   |                     |  |  |  |  |  |
| 1                   | (Name of sponsor)   |   | (Country)                                       |                     |  |  |  |  |  |
|                     | residing at   |   |   |                     |  |  |  |  |  |
|                     | (Street)  | (City/State)  | (Country)                                       | (Postal Code)       |  |  |  |  |  |
|                     |   |   |   |                     |  |  |  |  |  |
|                     | (Telephone)   | (Email)   |   |                     |  |  |  |  |  |
|                     | am executing this affidavit on behalf of  |   |   |                     |  |  |  |  |  |
|                     | Indicate your relationship to the student (son/daughter, niece/nephew, friend, self)  |   |   |                     |  |  |  |  |  |
|                     | Name(s) of the student's dependents you will also sponsor:  |   |   |                     |  |  |  |  |  |
|                     |   |   |   |                     |  |  |  |  |  |
|                     |   |   |   |                     |  |  |  |  |  |
|                     | I am employed with(Name of employed   |   | located at(Number and Street)                   |                     |  |  |  |  |  |
|                     |   |   |   |                     |  |  |  |  |  |
|                     | (Number and Street)   | (City/State) (C   | Country)  | (Postal Code)       |  |  |  |  |  |
| 2                   | Employer Phone: Employer Email:   |   |   |                     |  |  |  |  |  |
|                     |   |   |   |                     |  |  |  |  |  |
|                     | I receive an annual income of \$US from this employment. Income from other sources \$   |   |   |                     |  |  |  |  |  |
|                     | Attach verification of income tax statement and employment letter. If self-employed attach certificate of business ownership.   |   |   |                     |  |  |  |  |  |
|                     | I have \$US on deposit with (Name of Bank)  |   |   |                     |  |  |  |  |  |
| 3                   | Attach bank statements and other financial support evidence. Provide all attachments in national language and English translation.  |   |   |                     |  |  |  |  |  |
|                     | I support persons, including myself. My total annual income is \$US   |   |   |                     |  |  |  |  |  |
|                     | My total annual living expenses are \$1   | JS  | (housing, food, utilities, transportation etc.) |                     |  |  |  |  |  |
|                     | Tuition, Fees & Living Expense  | s for Academic Year (see Annu                                 | al Estimated Ex                                 | pense Table)        |  |  |  |  |  |
| 4                   | I will provide Tuition and Fees   | All Living Expenses:  | Housing, Uti                                    | lities & Meals Only |  |  |  |  |  |
|                     | Complete  | ONLY if student will live in you                              | r home  |                     |  |  |  |  |  |
| 5                   | I will provide the student named above  | ood, utilities & meals)                                       |   |                     |  |  |  |  |  |
|                     | Attach a co   | Attach a copy of your lease or a bill indicating your address |   |                     |  |  |  |  |  |
|                     | SIGNATURE  A service that the information shows in correct and a result of service the student accordable to the service that the service transfer in |   |   |                     |  |  |  |  |  |
| 6                   | I certify that the information above is correct and agree to sponsor the student named above.   |   |   |                     |  |  |  |  |  |
|                     | Name of Sponsor (Print)   |   |   |                     |  |  |  |  |  |
|                     | Signature of Sponsor  |   | Date  |                     |  |  |  |  |  |