



## **Southwest Texas College**

I-20 Request Form

Please complete the form as required to avoid delay in issuance of I-20. Name should be written *exactly* as it appears on your passport or national identity card.

Name			,			
(Last / Family Name)			(First Name)		(Middle Name)	
SWTX Student I.D. #			(If available)			
□ Associate Degree □ Certificate Program Major _				(If unsure write "Gene	cont Charling)	
			(	(If unsure write "Gene	eral Studies)	
City and Country of Birth			Country of Cit	tizenship		
Date of Birth	<u>-</u>	■Male	□Female	Campus Att	ending	
MM DD	YYYY			•	•	
Foreign Address (required)						
	Street Address					
City	State/D	rovince	Zip Code/Postal (	Codo	Phone Number (with area code)	
,			Zip Code/Postal C			
Are you a Commuter?  ☐Yes ☐No	Studying □Full-time	Part-time			alde) Reservation □ <sub>No</sub>	
U.S.A. Address						
Street/A	Apt# /P.O Box#					
City		State		Zip Code	Phone Number (with area code)	
Level of Education High S  Reason for Needing I-20	School Graduate	Associate Degre	Bachelor	-	Other	
Reason for Needing 1-20	□Applying Student v	risa (FI / MII)	□ Change of	i Major ∟1-2	to Loss/Damage	
	☐I-20 Extension-Nee	ed extension bed	cause			
	☐Change of Status (	Changing from			<u> </u>	
<u>_</u>			Current Visa Category			
∐Transfer Student (Tr		ransferring from Current U.S. Instituti		Institution	) tion	
	Other					
	_				_	
Source of Support/Income	Personal/Family Fu	inds	Sponsor \BS	ponsor Abroad	Other	
The information giv	en above by me is	accurate ar	nd true to the	best of my kn	owledge and belief.	
Signature of Student			Date	e:	-	
orgradure or otherwise					DD YYYY	
Deliver I-20 To						
Student Email address:						
Student Linan address						
	FC	OR OFFICE	USE ONLY			
	itial Attendance	☐ Continued A			nic Student	
	ansfer		nt			
Review Date	Review Date		School Official Signature			