

REQUEST FOR FORM I-20 ISSUANCE

STUDENT INFORMATION

PERSONAL INFORMATION	PLEASE PROVIDE COMPLETE INFORMATION BELOW
Family Name	
First Name	
Middle Name	
Country of Birth	
Country of Citizenship	
Birthdate	
Gender	
Foreign Address (City, State, Zip, Country)	
Local Address (City State, Zip)	
Telephone Number	
Email Address	
Passport (attach bio. Page)	
Current Visa Type (attach copy of visa)	
Form I-94 (attach copy or number)	
Last U.S.School Attended (Name, City)	
Last Non U.S.School Attended(City, County)	
Last Diploma/Degree Received	
PROGRAM INFORMATION	
Student FAMU Id Number	
Form I-20 Issue Reason (Initial or Transfer)	
Current Degree Pursuing	
Major	
Minor	
School or College	
Program Start Date	
Program End Date	
School Requires English Language Proficiency	
Student has English Language Proficiency	Yes
Provide any Important Comments	
FINANCIAL INFORMATION	
Twelve (12) Months	
Tuition Fees	\$25,868.00
Living Expenses (Housing, Meals, Trans)	\$8,552.00
Other Costs: (Insurance, Books, Clothes)	\$5,550
ANNUAL PROGRAM EXPENSES	\$39,970.00
Student's Personal Funds	
Funds from FAMU	
Specify FAMU Funding Type/Source	
Family Source(s)	
List other funding sources	
ANNUAL AVAILABLE FUNDS	\$0.00
Student's Personal Funds	
Family or Other Funding Source(s)	
Funds from FAMU (Specify funding type)	
REQUESTOR INFORMATION	
Name or Signature of Requestor	Paula S. Gomez
Date of Request	
Attach Supporting Documents	