

I-20 REQUEST FORM

STUDENT INFORMATION

| Student ID: | | SEVIS ID: | | Gender: \square Male \square Female | | |
|----------------------------|-----------------------|-------------------|-----------------|---|--------------------|--|
| Legal Name: _ | | | | Date of Birth: | | |
| | Last Name | First Name | Middle | (M | M / DD / YYYY) | |
| Country of Cit | izenship: | | Place of Birth: | | | |
| Foreign Addre | | | | | Tie / Pertal Calls | |
| | Stree | t Address | City | State / Province | Zip / Postal Code | |
| U.S. Address: ₋ | Stree | t Address | City | State | | |
| Phone: | | | Email: | | | |
| REQUEST TY | YPE: \square New St | tudent □ New St | tudent – Chan | ge of Status 🛭 Transfo | er Student | |
| PROGRAM C | F STUDY | | | | | |
| □ Er | nglish as Second | Language (ESL) | | | | |
| □ Ва | achelor of Arts in | Business Adminis | tration (BBA) | | | |
| □ М | aster of Business | Administration (I | MBA) | | | |

DEPENDENT INFORMATION (List F-2 dependents only)

| Name | Relationship | Sex | Date of Birth | Place of Birth | Country of Citizenship |
|------|--------------|-----|------------------|-------------------|---------------------------|
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FUNDING INFORMATION

| Please check the sources of financial support you will have while attending AEU: | | | | | | |
|---|--|--|--|--|--|--|
| Personal Funds: With your application enclose a translated financial statement on of bank letterhead signed by a bank official showing a translated current bank balance. | Personal Funds: With your application enclose a translated financial statement on official bank letterhead signed by a bank official showing a translated current bank balance. | | | | | |
| | Funds from relatives or another personal sponsor: With your application enclose a translated financial statement on official bank letterhead assigned by a bank official showing a translated current bank balance. | | | | | |
| Government or private sponsor: With your application enclose a translated signed copy of your award from the sponsoring agency. | | | | | | |
| DELIVERY INFORMATION | | | | | | |
| How would you like us to send you I-20? (check one applies to you) | | | | | | |
| $\ \square$ be sent to my U.S. mailing address. | | | | | | |
| $\ \square$ be sent to my permanent home country address. | | | | | | |
| □ pick up by | | | | | | |
| □ be sent to agent/sponsor. Agent/Sponsor Name: Address: | | | | | | |
| Phone: Email: | | | | | | |
| YOU WILL BE NOTIFIED BY EMAIL WHEN YOUR DOCUMENT IS AVAILABLE. | | | | | | |
| Applicant Signature Date | | | | | | |

*I affirm by my signature that I have furnished all information requested in this application. I understand that submitting any false information to the University, including but not limited to, false transcripts, test scores or any information contained on this form, or withholding information about my previous academic history will make my application for admission to the University, as well as any future applications, subject to denial, or will result in expulsion from the University. If I am accepted and enroll, I pledge to conduct myself with academic integrity and abide by the tenets of AEU Integrity Pledge.