

# Request for Form I-20 & Certificate of Finances Instructions International Students 2020 - 2021

## **Section I. Personal Information**

*(Student must complete all sections, unless exempted from specific items listed below.)*

***In what subject area do you plan to study/major?*** This information is required and will appear on your I-20. In addition, consular officials may inquire about your course of study, so be sure that it accurately reflects your academic interests (i.e., Computer Science, Business Analytics, Mechanical Engineering, etc.).

***If you are currently in the U.S., what is your visa status?*** Please indicate whether it is an F1, H4, R2 or any other type of non-immigrant visa.

\*Students studying in the U.S. must submit photocopies of current I-20 and I-94 documents with their application form.

## **Section II. Address Information**

***Permanent Address.*** Your permanent address must be a **non-U.S.** address in order for an I-20 to be issued to you. If you are currently living in the U.S., you must provide the address of a relative or friend abroad who will be able to retrieve your documents if necessary.

***Mailing address.*** Only complete this if you want your documents to be sent to an address other than your permanent address.

***Issuance of documents.*** Form I-20 will be mailed **first-class, air mail**. If you prefer to have documents mailed via courier service (DHL, UPS, FedEx, etc.), you must request special handling from the Admissions Office via e-mail at: [admissions@floridapoly.edu](mailto:admissions@floridapoly.edu). You must also provide billing information as you are solely responsible for all fees associated with this service.

## **Section III. Source and Amount of Funding**

According to USCIS regulations, the international student advisor is required to receive and evaluate evidence of financial support to verify that students will be able to sufficiently cover the costs of their education. Original documents or certified copies/letters must be provided by banks, sponsoring agencies, etc., as necessary, to confirm funding sources. The amounts provided must be equal to or greater than the estimated total cost of attendance for 2018-2019 (\$39,199 for undergraduates and \$38,192 for graduates).

***Source of Funds for 2020 - 2024.*** You must provide exact amounts for the academic year 2020 - 2021. For each subsequent year (2021 - 2022, 2022-2023, and 2023-2024), provide an estimate of the projected funds you plan to receive. Therefore, if you anticipate the amount of financial aid, family income, etc., to remain relatively the same, you may duplicate those amounts in the appropriate columns.

***Florida Polytechnic University Financial Aid.*** You must provide a copy of your Financial Aid award letter.

***Your Personal Funds.*** You must provide a bank statement or certified letter (with an English translation, as necessary) for any income earned from employment, etc., that will be applied to the costs of your education. While it is likely that the bank statement will fluctuate, please provide as accurate information as possible. For example, if you intend to provide \$3,000 and your bank statement indicates a balance of \$1,000, that is to be expected. We need to ensure that there is a pattern of assets being set aside for the purpose of funding your education. The amount that you provide on this form should be the amount you plan to have available at the time you travel to the U.S. to pursue your studies. You will have the opportunity to declare any dependents that will accompany you.

***Family/Relative Funds.*** You must provide a bank statement or certified letter indicating the amount of funds that your family members plan to apply to the costs of your education. While it is likely that the bank statement will fluctuate, please provide as accurate information as possible. For example, if you intend to provide \$3,000 and your bank statement indicates a balance of \$1,000, that is to be expected. We need to ensure that there is a pattern of assets being set aside for the purpose of funding your education. The amount that you provide on this form should be the amount you plan to have available at the time you travel to the U.S. to pursue your studies.

***Government or Sponsoring Agency.*** If you will receive any money (scholarships, grants) in addition to, or in place of, the funding sources listed above, you must provide the official letter(s) of support/award, along with the amount.

***Other.*** Any other funds being provided that do not apply to any of the previous sections should be listed here (stocks, etc.).

## **Sections IV & V. Verification & Student Signature**

Signatures are required for any person(s) providing funds, as well as for the student submitting the application.



# Request for Form I-20 & Certificate of Finances Instructions International Students 2020 - 2021

**Please complete this form carefully.** In order to receive a Certificate of Eligibility (Form I-20), which is required for you to apply for an F1 student visa stamp at a U.S. Embassy or Consulate, you must complete all sections of this form and provide the appropriate documentation to verify that you are able to cover the minimum expenses required for study at Florida Poly (see chart below). Florida Poly must confirm that sufficient funds will be available to you throughout your course of study. Any lack of documentation or incomplete information will delay the issuance of your Certificate of Eligibility. All information will be kept confidential in accordance with federal law. Therefore, please complete and return this form at your earliest convenience.

**Return this form  
(along with the necessary documentation) to:  
Office of Admissions Florida Polytechnic University  
4700 Research Way  
Lakeland, FL 33805-8531  
Or Email to: [admissions@floridapoly.edu](mailto:admissions@floridapoly.edu)**

The total estimated undergraduate cost of attendance of \$39,199 is based on an undergraduate student enrolled in 30 credit hours over an academic year of nine months, including tuition and fees, room and board, textbooks, personal expenses and travel, mandatory insurance.

Estimated graduate total cost of attendance is \$38,192 for a student enrolled in 18 credit hours per academic year. Please note that the cost of attendance information is subject to change without notice.

| Per academic year                         | Undergraduate   | Graduate        |
|---|-----------------|-----------------|
| <b>Tuition and Fees</b>                   | <b>\$21,005</b> | <b>\$19,998</b> |
| <b>Room and Board</b>                     | <b>\$11,800</b> | <b>\$11,800</b> |
| <b>Books (estimated)</b>                  | <b>\$ 1,200</b> | <b>\$ 1,200</b> |
| <b>Personal Expenses &amp; Travel</b>     | <b>\$ 4,000</b> | <b>\$ 4,000</b> |
| <b>Insurance(estimated)</b>               | <b>\$ 1,194</b> | <b>\$ 1,194</b> |
| <b>TOTAL ESTIMATED COST OF ATTENDANCE</b> | <b>\$39,199</b> | <b>\$38,192</b> |

## Section I. Personal Information

Please complete the sections below. Type or print clearly. Your name must be consistent with all of your immigration documents.

Check one:  Male  Female

Name (as on passport): \_\_\_\_\_  
(Family / Last Name)
(Given / First Name)
(Middle)

| Date of Birth<br>Day / Month / Year | City and Country of Birth | Country of citizenship | Country of<br>Permanent Legal Residence |
|-------------------------------------|---------------------------|------------------------|---|
|                                     |                           |                        |   |

Phone: \_\_\_\_\_  
Country code
City code
Number

Email: \_\_\_\_\_

In what subject area do you plan to study/major? (This information will appear on your I-20): \_\_\_\_\_

For students currently studying at another U.S. institution\*:

If you are **currently** in the U.S., what is your **visa status (i.e., F1, H4, etc.)**? \_\_\_\_\_

\*Students already studying in the U.S. must also submit photocopies of their current I-20 and I-94 documents with this form.

## Section II. Address Information

**In order to be issued a Certificate of Eligibility (Form I-20), you must provide a non-U.S. address. However, you may provide a different mailing address if you want your documents to be sent to another location. ALL DOCUMENTS WILL BE SENT VIA FIRST CLASS AIR MAIL.\*\***

**PERMANENT ADDRESS** (Required – this may **not** be a U.S. address):

|                         |                 |                      |
|-------------------------|-----------------|----------------------|
| House Number and Street | Apt. # (if any) | City                 |
| State/Province          | Country         | Postal Code (if any) |

**MAILING ADDRESS** (complete this **only** if you intend to have your I-20 sent to this address):

|                         |                 |                      |
|-------------------------|-----------------|----------------------|
| House Number and Street | Apt. # (if any) | City                 |
| State/Province          | Country         | Postal Code (if any) |

**\*\*If you want your documents to be sent via courier/express service (DHL, UPS, FedEx, etc.), please request special handling from the Office of Admissions via: [admissions@floridapoly.edu](mailto:admissions@floridapoly.edu). You will be responsible for paying any fees associated with this service.**

**Section III. Source & Amount of Funding**

Please complete all of the sections below and attach the required documentation. All financial documents must be originals; photocopies and faxes are not sufficient. All amounts must be quoted in U.S. dollars. If bank statements are not in English, a translation must be provided. Funds must be liquid assets available for support. Please also indicate any dependents who will accompany you to live in the U.S. during your studies. Only your legal spouse and dependent unmarried children under the age of 21 can be claimed as dependents. The financial requirement for each dependent is an additional U.S. \$3,000.

Will dependents accompany you? Yes  No  If yes, How many? \_\_\_\_\_ Also complete the Dependent Information Form

| Source of Funds  | Amount 2020-2021 | Amount 2021-2022 (projected) | Amount 2022-2023 (projected) | Amount 2023-2024 (projected) | Documentation Needed  |
|--|------------------|------------------------------|------------------------------|------------------------------|---|
| <b>Florida Polytechnic University Financial Aid</b>  | \$               | \$                           | \$                           | \$                           | <b>Required:</b> Copy of your Florida Poly Financial Aid Award letter.  |
| <b>Your Personal Funds</b><br>Name of Bank:  | \$               | \$                           | \$                           | \$                           | <b>Original</b> bank statement. Provide an English translation, as necessary.   |
| <b>Family/Relative Funds</b><br>Name:<br>Relationship to you:<br>Occupation:<br>Employer:<br>Education:<br><br>Name:<br>Relationship to you:<br>Occupation:<br>Employer:<br>Education: | \$               | \$                           | \$                           | \$                           | <b>Original</b> bank statement and signature (see Section IV, below). Provide an English translation, as necessary.           |
| <b>Government or Sponsoring Agency</b><br>Source:  | \$               | \$                           | \$                           | \$                           | Official letter of support from the government or sponsoring agency.  |
| <b>Other</b><br>Source:  | \$               | \$                           | \$                           | \$                           | Describe the source of funds and attach the appropriate documentation.  |
| <b>TOTAL</b>   | \$               | \$                           | \$                           | \$                           | This amount should be equal to or greater than the amount that is required to study for one academic year or nine (9) months. |

**Section IV. Verification**

**Sponsor's statement:**

This is to certify that I / we the undersigned have agreed to provide the funds indicated above to the applicant for the purpose of full- time study at Florida Polytechnic University, and that I am / we are submitting bank statements indicating the availability of these funds.

|                     |              |       |                           |
|---------------------|--------------|-------|---------------------------|
| _____               | _____        | _____ | _____                     |
| Sponsor's Signature | Printed Name | Date  | Relationship to Applicant |
| _____               | _____        | _____ | _____                     |
| Sponsor's Signature | Printed Name | Date  | Relationship to Applicant |

**Section IV. Student Signature**

**Student's statement:** This is to certify that the information given on this form is complete and accurate to the best of my knowledge. I also authorize Florida Polytechnic University to access my I-94 arrival and departure date records (accessible through U.S. Customs and Border Protection website) for immigration and on-campus employment purposes. I understand that as a non-immigrant student, I am expected to engage in full-time study at Florida Polytechnic University.

|           |              |       |
|-----------|--------------|-------|
| _____     | _____        | _____ |
| Signature | Printed Name | Date  |

**Immigration documents will be mailed within two weeks following the receipt of this form, provided that you have completed and returned the appropriate paperwork. Should you have any questions, please contact:**  
**Office of Admissions**  
**Phone: 863-874-4774 Email: admissions@floridapoly.edu**



**Purpose:**

This form must be completed to add, update or delete a dependent from the primary visa holder's SEVIS record. Please review our website for more instructions.

**Student Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Student ID: \_\_\_\_\_ SEVIS ID: \_\_\_\_\_

First Semester at Florida Poly: \_\_\_\_\_

**Action requested:**

Add dependent to:  I-20  DS-2019

\* F-1 or J-1 must provide proof of: (1) Financial documentation; A copy of your proof of funding, such as a recent official bank statement; a letter (on bank letterhead with the bank officer's signature, seal or stamp) confirming your funds; or a Florida Polytechnic University letter of funding. Multiple funding sources are permitted. (2) A copy of the dependent's passport.

Delete dependent's:  I-20  DS-2019

Change an existing dependent's  I-20  DS-2019

Change an existing dependent's information

Legal name change (must provide copy of passport)

Other: \_\_\_\_\_

**Dependent information:**

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

City of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Gender:  Male  Female

Country of Citizenship: \_\_\_\_\_ Dependent Relationship:  Spouse  Child

Country of Permanent Legal Residence: \_\_\_\_\_

4700 Research Way. Lakeland, FL 33805-8531  
(863)-874-4774

[www.floridapoly.edu](http://www.floridapoly.edu) - [admissions@floridapoly.edu](mailto:admissions@floridapoly.edu)

Please use this page if you are adding more than one dependent.

Date received: \_\_\_\_\_

Pick-up on: \_\_\_\_\_

Advisor initials: \_\_\_\_\_

**Additional Dependents:**

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

City of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Gender:  Male  Female

Country of Citizenship: \_\_\_\_\_ Dependent Relationship:  Spouse  Child

Country of Permanent Legal Residence: \_\_\_\_\_

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

City of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Gender:  Male  Female

Country of Citizenship: \_\_\_\_\_ Dependent Relationship:  Spouse  Child

Country of Permanent Legal Residence: \_\_\_\_\_

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

City of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Gender:  Male  Female

Country of Citizenship: \_\_\_\_\_ Dependent Relationship:  Spouse  Child

Country of Permanent Legal Residence: \_\_\_\_\_

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

City of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Gender:  Male  Female

Country of Citizenship: \_\_\_\_\_ Dependent Relationship:  Spouse  Child

Country of Permanent Legal Residence: \_\_\_\_\_

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Please use this page if you are adding more than one dependent.

Date received: \_\_\_\_\_

Pick-up on: \_\_\_\_\_

Advisor initials: \_\_\_\_\_