Thunderbird Adventist Academy SEVIS I-20 Information Form



All information on this form is required for the initial setup and reporting in the **STUDENT EXCHANGE VISITOR INFORMATION SYSTEM (SEVIS)** and for the issuance of the I-20 document.

STUDENT INFORMATION TO BE COMPLE			· ·	
Family Name (surname):				
First (given) Name, DO NOT ENTER MIDDLE NAME				
Country of Birth:				
Date of Birth (m/d/y):	, Gender: LJ Male L	Female		
Country of Citizenship:				
Do you presently have a United States Visa? \square	Yes 🗖 No. If yes, what type Visa	a?		
Student's Foreign Address:				
Street:				
City:	Province / Territory:			
Postal Code: Co	ountry:			
Student's U.S. Address (with Family or Guardian):	:			
Street:				
City:	, State:	, Zip:		
Telephone: Email (Optional):				
Name of school student will be attending:				
Street:				
City:	, State:	, Zip:		
School official to be notified of student's arrival in				
Name:	, Title: <u>SEVIS, PDSO</u> , Office P	Phone Number:	Email:	
TO BE COMPLETED BY SCHOOL PERSON The student named above has been accep		at		and
in grade The student is expected to report to the school no later than (date)and complete studies not				
later than (date)				
This certificate is issued to the student named	above for:			
 Initial attendance to this school. Continued attendance at this school. School Transfer; Transferred From: Other: 				
Level of education the student is pursuing or v Primary Secondary Other:				

English profi	ciency is required (please answer question as it is requi	ired by SEVIS):
Does the stud	ent have the required English proficiency?Yes orN	lo
If the student	is not yet proficient, will English instructions will be given at	the school?Yes orNo
The average	cost for the student for an academic term of mo	nths will be:
\$	Tuition and fees	
\$	Living Expenses	
\$	Other (specify):	
\$		
The school h	as information showing the following as the student's n	neans of support, estimated for an academic term ofmonths:
\$	Student's personal funds	
\$	Funds from this school. Specify Type:	
\$	Funds from another source. Specify:	
Remarks:		
TO BE CO	MPLETED BY PARENT OR GUARDIAN:	
that all inform in the United	ation provided on this form refers specifically to me and it is States temporarily, and solely for the purpose of pursuing a	terms and conditions of my admission and those of any extension of stay. I certify true and correct to the best of my knowledge. I certify that I seek to enter or remain full course of study at the school named above. I also authorize the named school ursuant to 8 CFR 214.3(g) to determine my nonimmigrant status.
Printed Stude	 nt Name	Student Signature

Date

If student is under 18 years of age, Parent/Guardian signature is required below:

Printed Name of Parent/Guardian

Signature of Parent/Guardian

Date

\$

Address

REGISTRATION FEE (TO BE COMPLETED BY SCHOOL PERSONNEL):

Registration fees of \$______ for the above named student has been paid in full AND/OR the tuition for

has been paid in full. If tuition has been paid in full, no personal financial data is needed.

However, a letter on school letterhead verifying total payment, signed by the principal or designated personnel, will be

<u>required</u>. If financial data is included with this form, please verify the information provided covers the year's tuition, etc.

Printed Name of Authorized School Representative Required

Signature of Authorized School Representative required

Date