



I-20 Application Form

Surname/Primary Name: _____ Given Name: _____

Name on Passport: _____ Preferred Name: _____

Date of Birth (mm/dd/yyyy): _____ Gender: Male Female

City and Country of Birth: _____

Country of Citizenship: _____

(Provide a copy of your passport to confirm citizenship, city, and country of birth. If your passport doesn't have all this information, provide a copy of your birth certificate as well.)

Permanent Address in home country:

Address: _____

City: _____ Province/Territory: _____

Postal Code: _____

Mailing Address (if different from Permanent Address)

Address: _____

City: _____ Province/Territory: _____

Postal Code: _____

(If Mailing address differs from Permanent address) Is this your current residence? Yes No

Foreign Phone Number (please include country/area code): _____

US Phone Number (please include area code): _____

Email Address: _____

Intended Degree: Bachelors Masters Doctorate

Intended Major: _____



Do you plan to live on campus? Yes No

If no, please enter address below:

Please list the name and relationship of the homeowner:

Name: _____ Relationship: _____

Note: A letter from the homeowner is required to confirm the off campus living accommodations stated above.

Are you currently in the United States? Yes No

Please check all of the following that apply to you:

- I am applying for my first F-1 visa at a United States Embassy/Consulate abroad.
- I wish to change my status to F-1 (only if you are currently in the United States under another status. **You must meet with your Admissions Counselor at Dominican University New York before your I-20 will be issued).**
- I am transferring to Dominican University New York from my current high school in the United States.

Name of High School: _____