

# IMMIGRATION Request Form

## University Center for International Education

(UCIE STAMP)
<b>DATE:</b> _____

<b>FIRST NAME:</b>	
<b>LAST NAME:</b>	
<b>UID#:</b>	
<b>PHONE NUMBER:</b>	
<b>WSU EMAIL:</b>	

***Requests may take up to seven (7) business days.***

<input type="checkbox"/> <b><u>Travel Request</u></b>  Submit I-20 or DS-2019 (and EAD card if applicable)	<b>Anticipated travel dates:</b>	<b>LEAVING United States:</b>	<b>RETURNING to United States:</b>
	<p><b><i>Please sign below that you agree to the following:</i></b></p> <ul style="list-style-type: none"> <li>• I am requesting a “travel endorsement” on my I-20 (or DS-2019) form.</li> <li>• I still have courses, degree requirements or projects I must complete for my current academic (or WSU exchange) program upon my return to the U.S. in order to qualify to graduate from the WSU degree (or exchange) program specified on my Form I-20 (or DS-2019).</li> <li>• I <b><i>intend</i></b> to be registered as a full-time student at WSU for the next academic semester following my re-entry to the United States (or continue with my current WSU exchange visitor program).</li> <li>• If I am unable to return to the United States for ANY reason for the next semester, I will notify the Immigration prior to the beginning of the semester.</li> <li>• I understand that if I arrive late for a semester or leave during the semester <b><i>I am responsible</i></b> for informing each of my professors of the late arrival or absence during the semester.</li> </ul>		

If you are leaving in <b><u>LESS than FIVE (5) business days</u></b> , please list the address you would like for us to send your I-20/DS-2019  <input type="checkbox"/> Please send information on express mail cost	<b>INTERNATIONAL MAILING ADDRESS:</b>  (or NAME of person who has PERMISSION to pick up I-20)	
	<b>INTERNATIONAL PHONE:</b>	

<input type="checkbox"/> <b><u>Replacement of Lost I-20 (or DS-2019)-</u></b> <i>(attach detailed description of how form was lost and sign below)</i>
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<input type="checkbox"/> <b><u>Dependent I-20 Request- Spouse/child</u></b>	
<b>Submit:</b> 1. Dependent passport 2. recent bank statement 3. proof of dependence (marriage certificate or birth certificate)	<p><b><i>Please sign below that you agree to the following:</i></b></p> <ul style="list-style-type: none"> <li>• I understand it is my responsibility to have my dependents check in with the UCIE upon arrival to the U.S.</li> <li>• I understand if I want to Opt In to WSU Dependent Health Insurance I must fill out appropriate Enrollment Forms and submit required documentation to Student Health Services.</li> </ul>

<input type="checkbox"/> <b><u>Other Request:</u></b>	
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⇨ My signature certifies that I understand and agree to the above requirements and that the statements are true in my case.	
Signature: _____	Date: _____