

## I-20 Certificate of Eligibility Application

International students need an I-20 to obtain the F-1 visa **AND** the F-1 non-immigrant status to legally enter the U.S. and temporarily stay for the sole purpose of study.

- **Before you apply:** [http://www.lehman.edu/students/international-students/index.php#f\\_1\\_students](http://www.lehman.edu/students/international-students/index.php#f_1_students)

### To apply for the I-20, complete and submit:

- ☐ Copy of Lehman College acceptance letter
  - ☐ Completed I-20 Application Form
  - ☐ Completed sponsor(s) proof of financial support form
    - Include:** Sponsor(s) original bank statements
    - Sponsor(s) proof of employment (e.g. official employer's letter).
  - ☐ Copy of passport(s)
  - ☐ Copy of dependent(s) passport(s)
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### F-1 international students transferring to Lehman from another U.S. institution must also submit:

- ☐ Completed SEVIS Transfer Release Form ([Download Form](#))
  - ☐ Copies of previous I-20s
  - ☐ I-94 Admissions/Departure record ([www.cbp.gov/i94](http://www.cbp.gov/i94))
  - ☐ Copy of F-1 Visa(s)
  - ☐ Copy of F-1 Change of Status Approval (I-94), if you did not enter the U.S. on an F-1 student visa.
  - ☐ Copies of Dependent(s) I-20s, I-94 & F-2 Visa
  - ☐ Copy of F-2 Dependent Change of Status Approval, if dependent(s) did not enter U.S on F-2 visa(s)
  - ☐ Copy of OPT employment authorization card (EAD), if you are currently on OPT
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**Submit completed forms and documents to:** [International Student & Scholar Office, Shuster Hall, Room 210](#)  
[250 Bedford Park Blvd. West, Bronx, NY 10468.](#)

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**Have questions? Email:** [isso.shuster@lehman.cuny.edu](mailto:isso.shuster@lehman.cuny.edu)

# I-20 Application Form

1	<b>NAME</b> (as in passport)				<input type="checkbox"/> Male <input type="checkbox"/> Female			
		Last name	First Name	Second given, or middle name	Gender			
2	<b>PRIMARY RESIDENCE</b> (Address)							
		Number and Street	City, State	Country	Postal Code			
3	<b>CONTACT INFORMATION</b>							
		Cell Phone	Fax Number	Email				
4	<b>DATE OF BIRTH</b>			Place of Birth				
		Month/Day/Year	City and Country					
5	<b>COUNTRY</b>							
		Countries of Citizenship		Countries of Residence				
6	<b>PERMANENT OVERSEAS ADDRESS</b>							
		Number and Street	City, State	Country	Postal Code			
7	<b>US MAILING ADDRESS (if known)</b>							
		Number and Street	City, State	Country	Postal Code			
8	<b>EXPECTED SEMESTER OF ENROLLMENT</b>	<input type="checkbox"/> Fall 20 ____ <input type="checkbox"/> Winter 20 ____ <input type="checkbox"/> Spring 20 ____ <input type="checkbox"/> Summer 20 ____		9	<b>FIELD OF STUDY</b>			
10	<b>DID YOU COMPLETE HIGH SCHOOL?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	11	<b>ARE YOU CURRENTLY STUDYING AT A U.S. INSTITUTION OR COLLEGE?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	12	<b>DO YOU CURRENTLY HOLD J-1 STATUS?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No

## TO BE COMPLETED BY APPLICANTS ALREADY IN THE U.S.

If you are currently in the U.S., please indicate your immigration status. **Attach a copy of the passport pages** with the passport number, expiration date of passport; the U.S. visa stamp; Form I-94 for yourself and accompanying family members and ALL previous I-20's and / or DS-2019's

13	<b>F-1 STUDENT STATUS</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>CURRENTLY IN STATUS</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>COMMENTS</b>		
14	<b>UNIVERSITY THAT ISSUED MOST RECENT FORM I-20</b>					<b>SEVIS #</b>	
15	<b>CURRENT U.S. SCHOOL</b>						
		Name	Address: Number and Street	City	State	ZIP Code	
16	<b>OTHER IMMIGRATION STATUS (IF APPLICABLE, SPECIFY TYPE)</b>						
17	<b>I-94 ADMISSION #</b>				<b>I-94 EXPIRES ON</b>		
						Month/Day/Year	

**Return completed form to:** DSO, International Student & Scholar Office, Shuster Hall, Room 210, 250 Bedford Park Blvd. West, Bronx, NY 10468

## Financial Sponsor Supporting Evidence

U.S. immigration authorities require colleges to receive satisfactory financial certifications from students before issuing a Form I-20. Sponsor(s) must show sufficient income and financial resources to assure the student will not become a public charge (receive U.S. Federal or State benefits or services).

A. **Sponsor(s)** must submit evidence of income and resources:

1. **Bank statements (Savings, Checking, and/or Brokerage account):**

- Date account opened
- Total amount deposited for the past year
- Present balance

2. **Employer statement** on company letterhead showing:

- Date and nature of employment
- Salary paid
- Whether the position is temporary or permanent

3. **Self-employed** are required to submit:

- Copy of last income tax return filed
- Certificate of Ownership
- Business Bank Statement

B. Self-sponsored students are solely responsible for their tuition, fees, and living expenses. Must show bank statements to cover their entire period of study.

**Submit original documents and also keep a set of originals for your appointment at the U.S. Consulate (or Embassy)**

### Estimated Expenses for International Graduate Students Attending Lehman College, CUNY

Tuition and Fees per academic year (9 months)	
* Tuition and Fees	<b>\$17,300.00</b>
Student Living Expenses	
** Housing	\$14,850.00
Food (at home)	\$2,850.00
Lunch	\$1,650.00
Personal Expenses	\$5,850.00
Transportation	\$1,450.00
Books and Supplies	\$1,900.00
<i>Total Student Living Expenses</i>	<b>\$28,550.00</b>
*** <i>Total Student Living Expenses w/dependent (1)</i>	\$35,550.00
<b>Total First Year Expenses</b>	<b>\$45,850.00</b>

\* Tuition and Fees stated are based on the students taking at least **9 credits** per semester; **\$830 per credit**. (Exception: Master's in Social Work is approximately \$970 per credit. Add an additional \$2,500 for tuition.)

You must take a minimum of nine (9) credits each semester to be considered a fulltime international student in lawful F-1 status.

Tuition and fees are set by the CUNY Board of Trustees and may change without notice.

\*\* Full room and board

\*\*\* For each dependent, add **\$7,000** to the Total Student Living Expenses

# Financial Sponsor Affidavit of Support Form

## SPONSOR INFORMATION

1

I, \_\_\_\_\_, citizen of \_\_\_\_\_,  
(Name of sponsor) (Country/ies)  
residing at \_\_\_\_\_  
(Street) (City/State) (Country) (Postal Code)  
\_\_\_\_\_  
(Telephone) (Email)

2

I am employed with \_\_\_\_\_ located at \_\_\_\_\_  
(Name of employer) (Street)  
\_\_\_\_\_  
(City/State) (Country) (Postal Code)  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
I receive an annual income of \$US \_\_\_\_\_ from this employment. Income from sources \$ \_\_\_\_\_  
**Attach verification of income (tax statement, paystubs, employment letter of annual income)**  
**Written in English or come with a certified translation.**

3

I have \$US \_\_\_\_\_ on deposit with (Name of Bank) \_\_\_\_\_  
Address of Bank: \_\_\_\_\_  
(Number and Street) (City) (State) (Postal Code)  
Email \_\_\_\_\_ Telephone \_\_\_\_\_

4

Including myself, I support \_\_\_\_\_ persons. My total annual income is \$US \_\_\_\_\_  
My total annual expenses are \$US \_\_\_\_\_

## STUDENT SUPPORT INFORMATION

5

This affidavit is executed on behalf of \_\_\_\_\_  
(Name of Student)  
Who was born on \_\_\_\_\_ S/he is my \_\_\_\_\_  
(Month/ Day /Year) (Relationship to Sponsor)

6

I hereby certify that I am willing, able, and do commit to provide \_\_\_\_\_  
(Name of Student)  
with the annual amount of \$US \_\_\_\_\_ for her/his tuition, fees and/or living expenses each year during the entire  
Program of study at Lehman College until \_\_\_\_\_ (give a date when the sponsorship is expected to end.)

## ROOM AND BOARD SUPPORT INFORMATION (To be completed if student will live in the sponsor's home).

7

I hereby certify that I will provide \_\_\_\_\_ with (check one)  
(Name of Student)  
☐ Room only in my home at the address indicated above **OR**  
☐ Full room and board in my home during each year that s/he is enrolled at Lehman College, CUNY

## SIGNATURE

8

I certify that the information above is a correct statement of my agreement to sponsor the student named above.  
Name of Sponsor (Print) \_\_\_\_\_  
Signature of Sponsor \_\_\_\_\_ Date \_\_\_\_\_