SAMPLE Certificate of Eligibility I-20

(for F visa holders)

PAGE 1

	SEVIS ID					
	U.S. Department of Justice	Certificate of Eligibility for Nonimmigrant (F-1) Student Page 1				
	Immigration and Naturalization Service	Status - For Academic and Language Students (OMB NO. 1115-0051)				
	Please read Instructions on Page 2 This page must be completed and signed in the U.S. by a designated school official.	SEVIS				
	1. Family Name (surname): Duck	For Immigration Official User Student's Copy				
	First (given) Name: Middle Name: Domaki	N0001234567				
	Country of birth: Date of birth(mo/day/year): INDIA 6/9/1934	ADMITTED AUGULT				
	Country of citizenship: Admission number:	AUG 2.2 2007 E				
	2. School (School district) name: Brandeis University	Cass <u>E-1</u>				
	Brandeis University	that bls *				
Degree Level	School Official to be notified of student's arrival in U.S. (Name and Title): Shobreh Harris					
3	SEVIS / PASS Coordinator, ISSO School address (include zip code):	Visa issuing post Date Visa Issued				
	415 South Street, MS 040 ISSO Waltham, MA 02454-9110	MUMBAI 03 APR 2007				
Major field	School code (including 3-digit suffix, if any) and approval date: B0S214F00063000 approved on 01/15/2003					
Major field	 This certificate is issued to the student named above for: Initial attendance at this school. 	Reinstated, extension granted to:				
of study	Level of education the student is pursuing or will pursue in the United States:					
	Instar's The student meed above has been accepted for a full course of study at this school, majoring in International Business/Trade/Commerce The student is expected to report to the school no later than 08/30/2007 and complete studies not later than 05/30/2009. The formal length of study is months. English proficiency: This school requires proficiency for the student has the sequence and proficiency. This school requires the student's average costs for an academic term of <u>3</u> top to 12/months to be: <u>5</u> Juition and fees <u>5</u> Jat 10,00	 8. This school has information showing the following as the student's means of support, estimated for an academic term of 9 months (Use the same number of months given in item 7). a. Student's personal funds \$ 50.145.00 b. Funds from this school \$ 0.00 Specify type:				
Program start //	b. Living expenses \$					
•	d. Othor (specify): \$0_0 Total \$50,145.00	· · · · · · · · · · · · · · · · · · ·				
date	10. School Certification: I certify under penalty of perjury that all information provand is true and correct; I executed this form in the United States after review and the student's application, transcripts, or other records of courses taken and prove execution of this form; the school has determined that the above named student' will be required to pursue a full course of study as defined by 8 CFR 214.2(f)(6).	d evaluation in the United States by me or other officials of the school of f of financial responsibility, which were received at the school prior to the s qualifications meet all standards for admission to the school; the student); I am a designated official of the above named school and am authorized				
Program end /	to issue this form. Shohreh Harris Automatic former of School Official Signature of Designated School Official Title	03/12/2007 Waltham, MA Date Issued Place Issued (city and state)				
	11. Student Certification: I have read and agreed to comply with the terms and compage 2. I certify that all information provided on this form refers specifically to seek to enter or remain in the United States temporarily, and solely for the purport form. I also authorize the named school to release any information from my recompt on immirrant status. DONALD DUCK	ditions of my admission and those of any extension of stay as specified on me and is true and correct to the best of my knowledge. I certify that I ose of pursuing a full course of study at the school named on page 1 of this				
	Name of parent or guardian Signature of parent or guardian If student under 18	Address (city) (State or Province) (Country) (Date)				
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Off-Campus Work Authorization (CPT/OPT) is found here if any has been authorized or recommended.

Travel Signature

[Must be less than 6 months old when re-entering the United States]

				SEVIS II		
/	(_))			
IF YOU NEED MORE INFORMAT IMMIGRATION PROCEDURES, PI IMMIGRATION AND NATURALL	EASE CONTACT EITHER	-1 NONIMMIGRA	NT STUDENT S TUDENT ADVIS	TATUS AND T SOR ON CAMP	HE RELATING US OR A NEAREY	
FAMILYNAME: Duck	· ·	FIRST NAME	Donald		Student's	
Student Employment Authorization:					NOOOIZ	
Employment Status: Duration of Employment - From (Date): Employer Name: Employer Location:	Type To (I	Date):				
Comments:						
Event History Event Name:		Event Date:				
Current Authorizations:		Start Date:	End Date:			
This page when properly endorsed, m Each certification signature is valid for	ay be used for reentry of the st r one year.	udent to attend the	same school after	a temporary abse	ence from the United S	
Name of School:		SEVIS / PASS Co	ordinato-	5		
Name of School Official	offeesignated School Official	Title		03/12/2007 Date Issued	Waltham, MA Place Issued (city an	
Name of School Official	of Designated School Official	Title	ctor, ISSO	Date Issued	Place Issued (city an	
	of Designated School Official	Title	······	Date Issued	Place Issued (city an	
	of Designated School Official	Title		Date Issued	Place Issued (city an	

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