

SEVIS ID: N0000000000

<b>SURNAME/PRIMARY NAME</b> Tiger	<b>GIVEN NAME</b> Ritchie	<b>Class of Admission</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
<b>PREFERRED NAME</b>	<b>PASSPORT NAME</b>	
<b>COUNTRY OF BIRTH</b> Canada	<b>COUNTRY OF CITIZENSHIP</b> Canada	
<b>CITY OF BIRTH</b>	<b>DATE OF BIRTH</b> 01 January 1990	
<b>FORMISSUE REASON</b> CONTINUED ATTENDANCE	<b>ADMISSION NUMBER</b>	

**SCHOOL INFORMATION**

<b>SCHOOL NAME</b> Rochester Institute of Technology Rochester Institute of Technology	<b>SCHOOL ADDRESS</b> Rochester Institute of Technology (c/o Intl Stu Services), 1 Lomb Memorial Drive, Rochester, NY 14623
<b>SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL</b> Susan Joseph Program Coordinator, ISS	<b>SCHOOL CODE AND APPROVAL DATE</b> BUF214F00033000 05 FEBRUARY 2003

**PROGRAM OF STUDY**

<b>EDUCATION LEVEL</b> MASTER'S	<b>MAJOR 1</b> Computer Software Engineering 14.0903	<b>MAJOR 2</b> None 00.0000
<b>PROGRAM ENGLISH PROFICIENCY</b> Required	<b>ENGLISH PROFICIENCY NOTES</b> Student is proficient	<b>EARLIEST ADMISSION DATE</b> 15 JULY 2017
<b>START OF CLASSES</b> 18 AUGUST 2017	<b>PROGRAM START/END DATE</b> 14 AUGUST 2017 - 06 MAY 2020	

**FINANCIALS**

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 43,900	Personal Funds	\$ 0
Living Expenses	\$ 12,274	RIT Scholarship	\$ 12,542
Expenses of Dependents (0)	\$	Family	\$ 45,658
Books/supplies	\$ 2,026	On-Campus Employment	\$
<b>TOTAL</b>	<b>\$ 58,200</b>	<b>TOTAL</b>	<b>\$ 58,200</b>

**REMARKS**

Request for post-completion OPT on page 2.

**SCHOOL ATTESTATION**

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X Susan Joseph **SIGNATURE OF:** Susan Joseph, Program Coordinator, ISS **DATE ISSUED** 02 March 2020 **PLACE ISSUED** Rochester, NY

**STUDENT ATTESTATION**

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

X Ritchie Tiger **SIGNATURE OF:** Ritchie Tiger **DATE** 03/02/2020

<b>NAME OF PARENT OR GUARDIAN</b>	<b>SIGNATURE</b>	<b>ADDRESS (city/state or province/country)</b>	<b>DATE</b>
	X		

SEVIS ID: N0023165115 (F-1)

NAME: Niharika Dalal

EMPLOYMENT AUTHORIZATIONS

TYPE	FULL/PART-TIME	STATUS	START DATE	END DATE
POST-COMPLETION OPT	FULL TIME	REQUESTED	29 JUNE 2020	28 JUNE 2021

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE
13 JANUARY 2020	06 MAY 2020

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Susan Joseph, DSO		X <i>Susan Joseph</i>	3/2/2020	Rochester, NY
		X		
		X		
		X		