

# Change of Status I-20 Request

Please submit this form to RIT International Student Services

## Biographical Data

Family Name:	First and Middle Name:	Birthdate:
Email:		RIT Student ID #:
US Local Address: _____ City: _____ State: _____ Zip Code: _____ Phone Number: _____	Permanent Foreign Address: _____ _____ City: _____ Province: _____ Postal Code: _____ Country: _____	
Country of Citizenship:	Country of Birth:	

## Change of Status Information

What is your current visa status: _____ Visa Status Applying for: (select one) F1 <input type="radio"/> F2 <input type="radio"/> <b>If you have checked F2 – Please give us the SEVIS ID of your spouse:</b> SEVIS ID# _____	Date Entered U.S. (or date current visa status began): _____
Are you currently enrolled at RIT: YES <input type="radio"/> NO <input type="radio"/> If no, what semester have you been accepted for: _____	
Program of Study (Major):	Degree Level Sought: