

## University of Washington I-20 Signature Example

Department of Homeland Security  
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status  
OMB NO. 1653-0038

**SEVIS ID: N0004705512**

<b>SURNAME/PRIMARY NAME</b> Doe Smith  <b>PREFERRED NAME</b> John Doe-Smith  <b>COUNTRY OF BIRTH</b> UNITED KINGDOM  <b>DATE OF BIRTH</b> 01 JANUARY 1980  <b>FORM ISSUE REASON</b> INITIAL ATTENDANCE - Updated Form I-20 or Name Conversion	<b>GIVEN NAME</b> John  <b>PASSPORT NAME</b>   <b>COUNTRY OF CITIZENSHIP</b> UNITED KINGDOM  <b>ADMISSION NUMBER</b>   <b>LEGACY NAME</b>	<b>CLASS</b>  <h1 style="font-size: 2em; margin: 0;">F-1</h1>  <b>ACADEMIC AND LANGUAGE</b>
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**SCHOOL INFORMATION**

<b>SCHOOL NAME</b> SEVP School for Advanced SEVIS Studies SEVP School for Advanced SEVIS Studies  <b>SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL</b> Rita Feet International Scholar Advisor	<b>SCHOOL ADDRESS</b> 9002 Nancy Lane, Ft. Washington, MD 20744  <b>SCHOOL CODE AND APPROVAL DATE</b> BAL214F44444000 03 APRIL 2015
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**PROGRAM OF STUDY**

<b>EDUCATION LEVEL</b> MASTER'S	<b>MAJOR 1</b> Economics, General 45.0601	<b>MAJOR 2</b> None 00.0000
<b>NORMAL PROGRAM LENGTH</b> 72 Months	<b>PROGRAM ENGLISH PROFICIENCY</b> Required	<b>ENGLISH PROFICIENCY NOTES</b> Student is proficient
<b>PROGRAM START DATE</b> 01 SEPTEMBER 2015	<b>PROGRAM END DATE</b> 31 MAY 2021	

**FINANCIALS**

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING SOURCE
Tuition and Fees	\$ 23,000	Personal Funds
Living Expenses	\$ 6,000	Scholarship
Expenses of Dependents (1)	\$ 3,000	Funds From
Other	\$	On-Campus E
<b>TOTAL</b>	<b>\$ 32,000</b>	<b>TOTAL</b>

**REMARKS**

Orientation begins 8/25/2015. Please report to ISSS upon arrival.

**SCHOOL ATTESTATION**

I certify under penalty of perjury that all information provided above was entered before I signed this form. I am a designated school official of the above named school and am authorized to issue this form.

<input checked="" type="checkbox"/> SIGNATURE: Rita Feet, International Scholar Advisor	<b>DATE ISSUED</b> 05 May 2015	<b>PLACE ISSUED</b> Ft. Washington, MD
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**STUDENT ATTESTATION**

I have read and understand the terms and conditions of my admission and those of my sponsor. I certify that all information provided on this form refers to me and is true and correct to the best of my knowledge. I certify that I seek to remain in the United States temporarily, and solely for the purpose of completing 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.**

<input checked="" type="checkbox"/> <b>Student Signature</b>	<input type="checkbox"/> <b>date</b>
<b>SIGNATURE OF:</b> John Doe Smith	<b>DATE</b>
<input type="checkbox"/> <b>If student is under 18, parent's name</b>	<input type="checkbox"/> <b>If student is under 18, parent's address</b>
<b>NAME OF PARENT OR GUARDIAN</b>	<b>ADDRESS (city/state or province/country)</b>
<b>SIGNATURE</b>	<b>DATE</b>

- I-20 must show **student signature and date**.  
  
You sign to show you have read, understood, and agree to follow the laws written on page 3 of your I-20.
- If student is **under 18 years old**:  
  
Parent/guardian must also sign, write address, and date.