

INTERNATIONAL STUDENT INFORMATION FORM

Please complete all sections. If it is not applicable, please enter N/A.
Please enter information EXACTLY the same as on your passport.
Once completed, please submit with all other required documents to the staff who requested it.

I. PERSONAL INFORMATION

Family Name: _____ First Name: _____

Current address - will be used as the mailing address:

Address Line 1: _____

Address Line 2: _____

City: _____ State/Province: _____ Post Code: _____

Country: _____

Phone Number: _____ Email: _____
Country code Number

I have been admitted in the following category:

- Degree seeking student, F-1/J1
 Short-term exchange program participant
 Studying at other status, Specify _____

Program Name: _____

I will be pursuing the following degree:
(if applicable)

- Bachelor Master Doctoral Graduate Certificate

Semester in which you plan to begin your studies:

- Fall Spring Summer Year: _____

Campus where you will be attending: _____

II. CURRENT IMMIGRATION STATUS

Have you been to the United States before?

- Yes No

• If yes, how much time have you spent in the U.S.?

• In what capacity were you in the United States?

- Visitor (B1/B2) Student Other: _____

Do you currently hold a valid immigration status in the U.S.

- Yes No
 B1/B2 F1 F2 H1-B H-4 J1 J2

• If so, what is your current legal immigration status?

- U.S. Permanent Resident
 Other (specify): _____

• What date does your status expire?

Are you living in the U.S. right now?

Yes No

- If Yes, do you plan to apply for a change of status IN THE U.S. prior to beginning your studies?

Yes, to F-1 Yes, to J-1* No

- If Yes and holding a visa other than F1/J1, and won't change status in the U.S., when do you plan to travel to the U.S.?

Yes No

If you are holding a F1 status, are you on Optional Practical Training (OPT) Yes No STEM OPT? Yes No

- If Yes, what is the OPT or STEM OPT End Date on your EAD? _____
- Are you planning to finish your OPT on the same date? Yes No
 - If No, when do you plan to finish prior to the End Date on your EAD? _____
- If Not on OPT, when was your Program End Date on your I-20 with your current school? _____

Please be aware of that you must complete your transfer and obtain The Chicago School's new I-20 within 60-day grace period from your Program

End Date or EAD End Date whichever is earlier and start with The Chicago School in the next available semester or within 5 months inclusive

III. BIOGRAPHICAL INFORMATION

Family Name: _____ First Name: _____

Permanent Foreign Address: (Immigration regulations require a non-U.S. permanent foreign address. This address is used for SEVIS reporting purposes and visa appointments.)

Address Line 1: _____

Address Line 2: _____

City: _____ State/Province: _____ Post Code: _____

Country: _____

Phone Number: _____ Email: _____
Country code Number

Sex: Male Female Other Date of Birth: Month: _____ Date: _____ Year: _____

Birth City: _____ Birth Country: _____

Country of Citizenship: _____
If you have dual citizenship, list the country of the passport you will use to enter the United States.

Country of Legal Permanent Residence: _____
This may be the same as your country of citizenship Do not type U.S.

For J-1 applicants only, sponsored by government: What is your current position in your home country:

- UNDERGRADUATE STUDENT GRADUATE STUDENT EMPLOYMENT: GOVERNMENT EMPLOYMENT: EDUCATION
 OTHER: _____

IV. DEPENDENT INFORMATION

Enter information for each dependent (spouse or child) who will accompany you to the U.S. in dependent status (F-2/J-2). Please be aware of that you are responsible for your dependent's insurance coverage. Please see the [website](#) for more information.

If you do not have dependents, or if your dependents will not accompany you to the U.S. in dependent status, you can go directly to next section. NOTE: Eligible dependents are spouses and children (parents, grandparents, fiancés, etc. are not considered dependents for visa purposes.)

DEPENDENT 1:

Family Name _____ First Name _____
Date of birth (mm/dd/yyyy): _____ Sex: Male Female Other
Relationship to F-1/J-1: Spouse Child
City of birth: _____ Country of birth: _____
Country of citizenship: _____ Country of Legal Permanent Residence: _____

DEPENDENT 2:

Family Name _____ First Name _____
Date of birth (mm/dd/yyyy): _____ Sex: Male Female Other
Relationship to F-1/J-1: Spouse Child
City of birth: _____ Country of birth: _____
Country of citizenship: _____ Country of Legal Permanent Residence: _____

IV. FINANCIAL INFORMATION

The Chicago School of Professional Psychology (The Chicago School) is required to obtain reliable documentation that you have adequate financial resources to meet expenses for your program before your I-20/DS-2019 can be issued. **Funding for F-1** may come through funds from sources like personal, family, or private loans. Loans of any kind constitute personal funds and do NOT qualify as institutional support, university support, or government funds. **Funding for initial J-1** must have majority source from government or institutional funding when the institution has an exchange agreement with The Chicago School.

Please outline your anticipated costs and financial support below.

Please be aware of that the numbers provided in [Proof of Financial Evidence](#) is an estimated average cost for 12 months based on the total required credit hours for your degree program and years to complete for “Normal Length of Study”. Your actual cost for each semester/year will vary based on the actual credit hours you register. Please consult with your Global Enrollment Counselor for details.

To find out what the minimum amount required for your program for I-20/DS-2019 issuance purpose, review the instructions on the document via the link above. At the end of the document, there is a list of Program of Studies. Find the program you have been admitted to, and you will see the minimum required amount for your program. Enter the numbers in the fields below.

COST		FUND		TYPE OF SOURCE
Tuition	\$ _____	Student Personal Funds:	\$ _____	
Living Expenses	\$ _____	Funds from School: International Grant is only counted ½ of awarded amount	\$ _____	School
Books	\$ _____	Funds from other Source*:	\$ _____	
Dependent(s) - \$5500 for Spouse; \$4500 per Child	\$ _____	N/A	N/A	N/A
Total Cost	\$ _____	Total Funds	\$ _____	N/A

*NOTE: You may use multiple sponsors, but each sponsor must provide the required financial documentation and a signed Affidavit of Financial Support

I-20 Application Checklist for F-1 Students

Complete this checklist and include it with the other required documents for issuance of your I-20. Submit completed application as instructed.

International Student Information Form

- Completed Section I: Personal Information (required)
- Completed Section II: Current Immigration Status (required)
- Completed Section III: Biographical Information (required)
- Completed Section IV: Financial Information (required)
- Completed Section V: Dependent Information (If applicable)

Change of Status Students:

I have contacted my campus GLOBAL ENGAGEMENT to request additional guidance about the process of changing my status.

Please mail my I-20/DS-2019 to:

My Current Address as in Section I

Other Address:

Address Line 1: _____

Address Line 2: _____

City: _____ State/Province: _____

Postal Code: _____ Country: _____

If you are an transfer student from another university in the U.S. and your SEVIS record is Active, please share the campus SEVIS Code below GLOBAL ENGAGEMENT Office:

The Chicago School of Professional Psychology – Anaheim Campus: CHI214F01259004

The Chicago School of Professional Psychology – Chicago Campus: CHI214F01259000

The Chicago School of Professional Psychology – Dallas Campus: CHI214F01259007

The Chicago School of Professional Psychology – Los Angeles Campus: CHI214F01259002

The Chicago School of Professional Psychology – San Diego Campus: CHI214F01259006

The Chicago School of Professional Psychology – Washington, D.C. Campus: CHI214F01259005

STUDENT SIGNATURE: _____ **DATE:** _____