

I-20 Request – Change of Status to F-1

Family/Last Name	First Name	Middle Name	WCUID
Date of First Semester at WCU	Field of Study	Expected date of Graduation	Email Address
Telephone Number	Date of Birth	<input type="checkbox"/> Bachelors <input type="checkbox"/> Masters	Current Status: <input type="checkbox"/> F-1 <input type="checkbox"/> J-1

Home Country Address:

Please choose one Change of Status method:

- ☐ Request I-20 for Change of Status in the U.S.
- ☐ Request I-20 (Initial Attendance) requiring travel and re-entry to the U.S.

Please choose one delivery method:

- ☐ Pick up I20 at the Center for International Programs
- ☐ Mail to local U.S. address: _____
- ☐ Mail to home country address: _____

THIS PORTION TO BE SIGNED BY THE STUDENT AND CIP DSO/ARO

By signing below, I confirm that I have read and understand all Change of Status regulations and policies stated on the CIP website.

Student's Signature

Date

DSO/ARO

Date