UNIVERSITY REGISTRAR
FLORIDA POLYTECHNIC UNIVERSITY

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

REQUIREMENTS

This form must be completed by international students seeking to change their current nonimmigrant visa (NIV) status to F-1. Form I-20 (I-2) is required to apply for the F-1 visa. Please ensure to complete all applicable sections and submit the required evidence. Incomplete forms and missing evidence will delay the issuance of your I-20. Before submitting this form, you MUST complete the Change of Status to F-1 course in CANVAS (if you have not already).

Please Remember to submit the following items with this form:

- ✓ **Color Copy Passport:** expiration must be valid for at least six months beyond your stay in the United States (US).
- ✓ **Financial Evidence:** You must have sufficient funds to finance your studies and living expenses in the US.
- ✓ **Dependent Request Form: Only if you have or are bringing dependents (spouse/children) to the US.**

SECTION 1: STUDENT PERSONAL INFORMATION

Last Name: _____ First/Middle Name: _____ Suffix _____

Preferred Name: _____ (*this can be a nickname or alternate name you prefer to be called)*

Birth Date *(MM/DD/YYYY)*: _____ Country of Birth: _____ Country of Citizenship: _____

City of Birth: _____ Gender: _____

Foreign Address: Street Address *(non-US)*: _____ Apt/Unit #: _____

City: _____ Province/Territory: _____ Postal Code: _____

Country: _____ Email Address: _____ *(provide personal email that you check often)*

Home Telephone: Country Code: + _____ Number: _____ Cell *(or other number)*: _____

Change of Status Option

Please select the option you will apply under:

☐ Option 1: Travel & Re-entry ☐ Option 2: Change of Status in the US

Upon the issuance of the I-20, you will be provided with the next steps based on the option selected.

SECTION 2: STUDENT PROGRAM OF STUDY & HOUSING PLANS

Major: _____ Education Level *(check one)*: ☐ Undergraduate ☐ Graduate

Please check your intended housing plans: ☐ On-Campus ☐ Off-Campus

SECTION 3: DEPENDENTS

Will you have legal dependents residing in the US while studying? ☐ Yes ☐ No

- **If yes**, complete the **F-1 Dependent I-20 Request** and submit with this form via email to ISS.

Dependents include a legal spouse and unmarried dependent children (under the age of 21) only.

SECTION 4: FINANCIAL ELIGIBILITY

It is important that students review, understand, and follow the instructions in this section.

All students applying for the F-1 visa are required to submit evidence that they have the financial resources to cover estimated costs of attendance (COA). Estimated COA includes tuition and fees, housing, mandatory health insurance, meals, books and supplies, transportation, and other living expenses for an academic year (fall and spring semester).

- Estimated COA are **not** a student's bill; actual costs may be more or less; however, students should be prepared to cover additional costs, such as annual fee increases, summer living expenses, traveling back and to home country, or enrolling for the summer term.
- Estimated COA are based on students **not** residing with parents or relatives; if you will be residing with a parent or relative, please ensure you complete the *Sponsor Affidavit: Free Room and Board form* as instructed in *Section 5*.

Estimated Costs of Attendance:

Please view the estimated (COA) costs of attendance chart below for your education level. These costs are based on estimates for an academic year for 30 credit hours of undergraduate study and 18 credit hours of graduate study.

****Fees are subject to change without notice.***

Education Level	Tuition & Fees *Non-Resident	Room & Board	Books	Transportation & Other Expenses	Health Insurance *Required Coverage	Total
Undergraduate	$21,005	$14,482	$839	$3,956	$1,600	$41,882
Graduate	$19,998	$14,482	$839	$3,956	$1,600	$40,875

Add an additional $3000 per dependent to total if student's spouse/child(ren) will accompany them to the US (see Section 3).

Financial Evidence Criteria:

Students must submit financial evidence to certify they have sufficient funds available to cover their estimated COA. Funds must be liquid and currently available (i.e., savings or checking). Documents must be **dated no more than six months** from the first day classes, be **translated in English**, state the account holder's name, identify the type of account, show current available balance, and be **issued by a financial institution**.

Please review acceptable examples of financial documents:

- Official bank statements or certified letter from bank.
- Educational loan letter including terms and conditions (funds availability date and total loan amount).
- Signed copy of financial aid award letters (i.e., loans, scholarships, assistantships, fellowships).
- Sponsor Affidavits of Support and financial evidence from the sponsor(s).
- Support from a business account requires a recent bank statement from a business, an official bank letter indicating the name of individual(s) with signatory power, and an affidavit of support.

Unacceptable evidence includes documents not older than 6 months and:

- Real estate holdings, stocks, bonds, life insurance policies, retirement/pension funds or investments.
- Income or salary verification letters/statements or unapproved loan documents.
- Screenshots of online banking information (must be copy of official statement or certified letter from bank).

SECTION 5: IDENTIFY SOURCE OF FUNDS

Identify your source of funds and amounts **(in USD)** that will be used to cover estimated COA for **one academic year** (fall and spring). Ensure the required evidence is submitted and utilize the estimated COA chart in *Section 4* to ensure total funds equal the total for your education level.

☐ **Graduate Assistantship (GA)** ***(Check if awarded a GA and attach signed award letter)***

- **Tuition Assistance: $19,998** **Stipend: $8000**

☐ **Graduate Education Assistantship (GEA)** ***(Check if awarded a GEA, attach signed award letter, and enter stipend total)***

- **Tuition Assistance: $19,998** **Stipend : $_____**

☐ **Latin & Caribbean (LAC) Scholarship** ***(Check if awarded the LAC scholarship and attach signed award letter)***

- **Undergraduates: Scholarship $1,000** **In-State Tuition Waiver: $16,065**
- **Graduates: Scholarship: $1,000** **In-State Tuition Waiver: $11,492**

Other Florida Poly Financial Aid ***(List additional scholarship, grants, or fellowships awarded by Florida Poly that are not listed above)***

- **Enter Total Amount: _____**
- **Evidence Required:** Attach copy of signed award letter.

Student's Personal Funds

- **Enter Total Amount: _____**
- **Evidence Required:** Attach copy of banking statement, certified bank letter or applicable financial documentation.

Financial Support from Family/Friends

- **Enter Total Amount: _____**
- **Evidence Required:** If you will receive financial support towards your estimated costs from family, friends, or other party they must complete the **Sponsor Affidavit of Support** and provide the required evidence listed on this form.

Free Room and Board from Family/Friends

- **Enter Total Amount: _____**
- **Evidence Required:** If you will receive free room and board while studying in the US, the party sponsoring you must complete the **Sponsor Affidavit: Free Room & Board** and provide the required evidence listed on this form.

Government or Sponsoring Agency or Other Source of Funding ***(i.e., external sources outside of Florida Poly)***

- **Enter Total Amount: _____**
- **Evidence Required:** Attach copy of the award letter or letter of support from the government/sponsoring agency; or copy of grant statement, loan approval, or other statement to verify funding.

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STUDENT CERTIFICATION

*My signature certifies my understanding, the validity of all information provided, and intent to meet all requirements. I understand if I fail to comply, this can prevent enrollment, result in a delayed start date, or the ineligibility to study in the US. I will contact Admissions or ISS if I need assistance **prior** to my I-20 start date.*

1. *A color copy of my passport is attached with a valid expiration date of at least 6 months beyond my intended stay in the US.*
2. *I understand estimated costs of attendance (COA) are not my actual bill, the summer term is not included in these costs, and that I must budget for any additional expenses.*
3. *I have included evidence of my financial ability to cover the total amount estimated COA for my education level, and that the total evidence provided meets or exceeds the total costs.*
4. *I understand I am required to purchase health insurance and provide evidence of coverage, **prior** to arriving in the US.*
5. *I understand if bringing dependents with me I must add an additional $3000 per dependent to my estimated COA.*
6. *I understand that I must select Option 1 or 2 for my method of application process to change my nonimmigrant status to F-1.*
7. *I understand that I may not study under the F-1 status until I have been approved and am eligible to enroll under this status.*

Print Your Full Name: _____ **Date:** _____

Student Signature: _____

STUDENT'S PARENT MUST COMPLETE THIS SECTION ONLY IF STUDENT IS A MINOR (under 18 years of age)

Print Parent Full Name: _____ **Date:** _____

Parent Signature: _____