LIU Post

720 Northern Blvd.
Brookville, N.Y. 11548-1300 U.S.A.
post-international@liu.edu
www.liu.edu/post/international



LIU Brooklyn

1 University Plaza Brooklyn, N.Y. 11201-8423 U.S.A. admissions@brooklyn.liu.edu

www.liu.edu/Brooklyn/Admissions/International

FORM I-20 APPLICATION - 2017/2018 Academic Year

Please <u>type</u> in the fields, complete all sections and return application, LIU affidavit of support, and required documents to the LIU campus you plan to attend. Scanned originals can be emailed to your admissions counselor. Incomplete information or lack of supporting documentation will delay issuance of Form I-20 until all documentation is received: it will be mailed to you by air courier. This school is authorized under Federal law to enroll nonimmigrant alien students.

SECTION I: PERSONAL INFORMATION						
Use name in passport (you must attach a photocopy of your passport identification page(s) to this application).						
Last/Family/Surname	First/Given	Middle				
Country of Citizenship	Country of Birth	Date of Birth (MM/DD/YY)				
I have been accepted and plan to attend:	LIU Brooklyn	LIU Post				
·	<u> </u>	IU Student ID#: 100				
Academic Degree Program Level of Stu	dy (Undergraduate or Graduate)					
		Gender: ☐ Female ☐ Male				
Personal Email (Required)	Telephone Number (Required)					
House Number and Street Address						
City State/Province	Country	Postal Code				
U.S. Home Address (Required if you transfermant House Number and Street Address	r your I-20 from another institution in	u.S. or a current LIU student):				
City State/Province	Country	Postal Code				
I prefer to have my I-20 mailed to: Perm	nanent International U.S. Home A	Address Pickup (LIU POST ONLY)				
LIU POST APPLICANTS	ONLY (complete on if choosing picku	p option above)				
Please hold my I-20 for in person pickup at	LIU Post, 720 Northern Blvd., Brookvil	lle, N.Y. (Photo ID will be required)				
Name of person who will pick up the I-20:		Date of Birth:				
Phone Number:	Email:					

	SECTIOI	N II: REAS	SON FOR I-20 F	REQUEST		
☐ In ☐ R ☐ Cł 2. A	urpose of your requested I-20 (check itial I-20 (1st time U.S. school) einstatement Travel & Re nange of Status by travel outside the Ure you currently in the U.S.? 1a. If yes, what is your current in the your current in the your service and service you currently studying under an F-2a. If yes, what is your SEVIS IDE 2b. If yes, is your I-20 currently	Trans -entry J.S.A. visa type? 1 visa and #? in active s	Char	tion of Dependenge of Status by	ent I-20	ucation Level 0 Extension J.S. No No No No
Т	If no, please list a reason you are transferring from another U. ransfer-In Form Application (separate ost: www.liu.edu/Post/Admissions/Fo	S. Institut		ow).		
	SECTION	I III: DEPI	ENDENT INFOR	RMATION		
	spouse or child accompany you to LIU yes, please attach copies of passport(translated marr	Yes		pes not apply low.
	Name (First Last)	Gender (M/F)	Date of Birth (MM/DD/YY)	Country of Birth	Country of Citizenship	Cost
Spouse						+\$8,000
1 Child						+\$5,500
2 Child						+\$5,500
			l	I .	I	
	SECTION IV	: FINANC	IAL SUPPORT	WORKSHEET		
NOTE: not	all the types of proof of income may app				fill in the amou	nt as \$0
		CERTIFIC	ATION OF FUNI			
	Proof of Income			t of Funds Availa	able for EACH Y	ear of Study
Persona			+			
	r Individual Sponsors		+			
	ational Sponsorship		+			
-	rds/Scholarships (submit a copy)		+			
	ents (if applicable)		+			
	om and Board (<i>if applicable,</i> \$12,600)		+			
TOTAL			=			
University to waive t	at the information given is an accurate an I also acknowledge that LIU requires al he health insurance fee by the waiver dea below, I certify that I, the applicant, have	l F-1 stude adline if I h	ents to subscribe have another acco	to mandatory he	alth insurance. I	_
Signature	:			Date (mm/dd/y	ууу):	
Print Name:		Student ID: 100				

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FORM I-20 AFFIDAVIT OF SUPPORT

This document must be completed by <u>each</u> family member or other individual(s) listed on bank statement(s). **Print additional pages if necessary.** It is highly recommended that some or all funding come from your home country and immediate family support is preferable to friends or distant relatives. **Student ID#: 100**_____

I hereby certify that I am				
Thereby certify that I alli	able and willing and promi	ise (print name of student)		
A total of U.S. \$	I of U.S. \$ for tuition, fees and living expenses <i>during each year</i> of study at LIU.			
Evidence of my current f	financial resources accomp	anies this affidavit.		
Signature		Date (mm/dd/yyyy)		
Print Name (Given and Fam	 nily Name)	Relationship to Student (Father, Mother, Cousin, Friend)		
Permanent Residential Add	dress (Required: this cannot be	a P.O. Box address)		
SPONSOR #2 (if necessar		ise (print name of student)		
		s, and living expenses during each year of study at LIU.		
A LULAI UI U.J. J	,			
	financial resources accomp			
	financial resources accomp			
Evidence of my current t		panies this affidavit.		