

**SUPPLEMENTAL INTERNATIONAL STUDENT APPLICATION
Mandatory SEVIS Compliance Information**

Applicant's Name (exactly as it appears in passport):

(last/family/surname) (first/given name) (middle name)

Current Address: _____

Current Phone Number: _____

E-mail: _____ @ _____

Home Country Address (required): _____

Home Country Phone: _____

Preferred Mailing Address: (for mailing of admission decision & immigration documents)

City of Birth: _____ **Country of Birth:** _____

Country of Citizenship: _____

Country of Legal Residence: _____

Are you presently in the U.S.? _____ Yes _____ No

If in the U.S., what is your current visa? _____ When did you first arrive in the U.S. on this visa? _____
(month) (day) (year)

Are you requesting an I-20 from Radford University? _____ Yes _____ No

Will you have any dependants accompanying you? _____ Yes _____ No

If yes, please list full name (as on passport), city of birth, country of birth and relationship of each family member:

Family Name	First Name	Middle Name	Date of Birth	City of Birth	Country of Birth	Relationship

Are you transferring directly from a U.S. school? _____ Yes _____ No

If so, what is the name of your current school? _____

Do you currently have a SEVIS I-20? _____ Yes _____ No _____ Don't know

Please return this form with your application

Or fax it to:

Attn: Teresa King

FAX: 540-831-6588