

Office of International and Off-Campus Programs and Summer School  
The College of New Jersey

APPLICATION FOR A FORM I-20  
Certificate of Eligibility for F-1 Student Status

**PART I: Personal Information**

Name in passport: You must attach a photocopy of your passport's identification pages to this application.

Family (Surname) \_\_\_\_\_ First (given) \_\_\_\_\_ Middle \_\_\_\_\_

Foreign Address \_\_\_\_\_  
Number and Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

U.S. Address \_\_\_\_\_  
Number and Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Date of Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Gender: Male [ ] Female [ ] City of Birth: \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Country of Permanent Residence \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
Name \_\_\_\_\_ International Telephone # \_\_\_\_\_

Emergency Address \_\_\_\_\_  
Number and Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

E-mail: \_\_\_\_\_  
Relationship \_\_\_\_\_

What level of Education will you be pursuing? \_\_\_\_\_

What is your Major field of study? \_\_\_\_\_

What is your Minor field of study? \_\_\_\_\_

Have you been notified of your admission to our school? Yes [ ] No [ ]

Is English your Native Language? Yes [ ] No [ ]

Please indicate how you will show evidence of your English proficiency (*circle one below*):

- TOEFL\* Test Date \_\_\_\_\_ Test Site \_\_\_\_\_
- Intensive English as a Second Language (ESL) program at an accredited U.S. Institution. Send an official transcript or certificate of completion.
- 3 credits of a college-level English Composition course (with a grade of C or better). Send an official transcript from U.S. College.

Fax: 609-637-5128

Phone: 609-771-2576

iss@tcnj.edu

\* Please note that your Form I-20 cannot be issued until you are accepted.

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Unmarried [ ] Married [ ] Please complete the following information about your spouse and/or child (children) only if they will come with you to the U.S.

Name (family, first) \_\_\_\_\_ Date of birth \_\_\_\_\_ Country of birth \_\_\_\_\_ Relationship \_\_\_\_\_

Name (family, first) \_\_\_\_\_ Date of birth \_\_\_\_\_ Country of birth \_\_\_\_\_ Relationship \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**PART II: Present Immigration Status**

**Please check the following that indicates what your I-20 is for:**

- F-1 Transferring/changing U.S. Schools \_\_\_\_\_
- F-1 Changing educational level/program at TCNJ \_\_\_\_\_
- F-1 Reinstatement to F-1 Status \_\_\_\_\_
- Another status. Please specify \_\_\_\_\_

What is your SEVIS ID Number? \_\_\_\_\_

**PART III: How you will receive your I-20**

Your Form I-20 will be sent standard air-mail to the name and address you indicate in the address box. *If you need express delivery service*, you should request someone in the U.S. to pick it up and send it to you. If that isn't possible, please contact our office. PRINT YOUR NAME AND ADDRESS IN ENGLISH, EXACTLY AS IT SHOULD APPEAR ON THE ENVELOPE.

Name: _____
Address Line 1: _____
Address Line 2: _____
City: _____
State, Zip Code: _____

Fax: 609-637-5128

Phone: 609-771-2576

iss@tcnj.edu

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date