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**INTERNATIONAL STUDENT TRAVEL I-20 / SIGNATURE REQUEST**

Today's Date: \_\_\_\_\_

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

SJSU ID#: \_\_\_\_\_ Email Address: \_\_\_\_\_

Current Address: \_\_\_\_\_

If staying on campus: which building (i.e. CVB, Joe West Hall) and your room #:

\_\_\_\_\_

Travel dates (can be estimated) \_\_\_\_\_ to \_\_\_\_\_  
Date Date

If a continuing student: do you plan to return for next semester? Yes No

Emergency Contact:

- Name: \_\_\_\_\_
- Relationship to you: \_\_\_\_\_
- Email: \_\_\_\_\_
- Telephone: \_\_\_\_\_

**For students on Post or STEM OPT:**

Current employer: \_\_\_\_\_ Start Date: \_\_\_\_\_

Address: \_\_\_\_\_

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FOR ISSS STAFF:

- ☐ Academic Standing
- ☐ Next semester term activation or Graduate \_\_\_\_\_
- ☐ Address update
- ☐ SEVIS check
- ☐ Post/STEM OPT EAD card on file
- ☐ For OPT/STEM - Current employer
- ☐ Additional notes/comments: