

SEVIS ID: N0025170967

SURNAME/PRIMARY NAME Teng	GIVEN NAME Tina	Class of Admission F-1
PREFERRED NAME Tina Teng	PASSPORT NAME	
COUNTRY OF BIRTH CANADA	COUNTRY OF CITIZENSHIP CANADA	
DATE OF BIRTH 29 OCTOBER 1999	ADMISSION NUMBER	
FORM ISSUE REASON INITIAL ATTENDANCE	LEGACY NAME	ACADEMIC AND LANGUAGE

SCHOOL INFORMATION

SCHOOL NAME University of California at Berkeley University of California at Berkeley	SCHOOL ADDRESS Berkeley International Office, 2299 Piedmont, Berkeley, CA 94720
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Vanina Granell International Student & Scholar Advisor	SCHOOL CODE AND APPROVAL DATE SFR214F00615000 27 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL BACHELOR'S	MAJOR 1 General Studies 24.0102	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 20 MAY 2017
START OF CLASSES 03 JULY 2017	PROGRAM START-END DATE 19 JUNE 2017 - 14 MAY 2021	

FINANCIALS

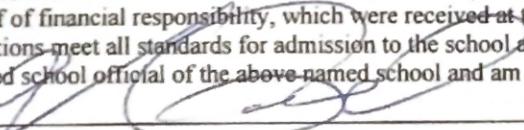
ESTIMATED AVERAGE COSTS FOR: 12 MONTHS		STUDENT'S FUNDING FOR: 12 MONTHS	
Tuition and Fees	\$ 42,802	Personal Funds	\$ 0
Living Expenses	\$ 23,100	Funds From This School	\$
Expenses of Dependents (0)	\$ 0	Family Support	\$ 65,902
Other	\$	On-Campus Employment	\$
TOTAL	\$ 65,902	TOTAL	\$ 65,902

REMARKS

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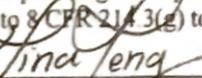
SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above-named school and am authorized to issue this form.

X 	DATE ISSUED 06 May 2017	PLACE ISSUED Berkeley, CA
SIGNATURE OF: Vanina Granell, International Student & Scholar Advisor		

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(e) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

X 	12 May 2017
SIGNATURE OF: Tina Teng	DATE
JULIE CHOU	207-5981 GRAY AVE BC/CANADA
NAME OF PARENT OR GUARDIAN	ADDRESS (city/state or province/country)
	DATE

SEVIS ID: N0025170967 (F-1)

NAME: Tina Teng

EMPLOYMENT AUTHORIZATIONS

CHANGE OF STATUS/CAP-GAP EXTENSION

AUTHORIZED REDUCED COURSE LOAD

CURRENT SESSION DATES

CURRENT SESSION START DATE

CURRENT SESSION END DATE

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Vanina Granell, DSO	Berkeley, CA	X 	5/8/07	
		X		
		X		
		X		