	The state of the S	Association of Addition (Sec. 18)	ed and the first the second of						
	Please read Instructions on Page 2 This page must be completed and signed in the U.S. by a designated school official. SEVIS								
1.	Family Name (surname): Jurkovic		For Immigration Official User	Student's Copy N0009505822					
	First (given) Name: Middle Nar Iva	me:							
Ì	Country of birth: CROATIA	Date of birth(mo/day/year): 07/25/1985		17.17.77					
	Country of citizenship: CROATIA	Admission number:							
2.	School (School district) name:		il	2072500					
	Illinois Institute of Technology Main Campus			7.00					
- 1	School Official to be notified of student's arrival in U.S.(Nam	e and Title):	11	2000					
- 1	Tanya DePass	500-500000000 0 000		101122002					
-	International Student Advisor/SEVIS Coordinator		Visa issuing post Date Visa Issued	********					
- 1	School address (include zip code): 3300 S. Federal Street		II I						
- 1	Main Building Room 405			200					
- 1	Chicago, IL 60616-3793 School code (including 3-digit suffix, if any) and approval da	te'		164-08-02 670-1879-157					
- 1		d on 01/09/2003		3000					
3.	This certificate is issued to the student named above		Reinstated, extension granted to:						
Э.	Initial Attendance - Change of Status R								
4.	Level of education the student is pursuing or will pur	rsue in the United States:		DESCRIPTION OF THE PROPERTY OF					
	BACHELOR'S								
5.	The student named above has been accepted for a full course of study at this school, majoring in Business Administration and Management . The student is expected to report to the school no later than 08/20/2012 and complete studies not later than 05/12/2018 . The normal length of study is 72 months. This school has information showing the following as the study means of support, estimated for an academic term of 9 months (Use the same number of months given in item 7). a. Student's personal funds 5 a. Student's personal funds 5 b. Funds from this school \$\$\$ 28,500.0 Specify type: International Student Scholar								
6.	English proficiency: This school requires English proficienc The student has the required English pr	y. oficiency.	c. Funds from another source \$ Specify type: Family Funds	83,830.00					
7.	This school estimates the student's average costs for (up to 12) months to be:	an academic term of	d. On-campus employment \$ Total \$	0.00					
	a. Tuition and fees \$	38,850.00	9. Remarks:						
	b. Living expenses \$ c. Expenses of dependents (0) \$	12,000.00							
	d. Other (specify):	0.00							
	Total \$	50,850.00							
10	School Certification: I certify under penalty of perjury that all information provided above in items 1 through 9 was completed 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; the student will be required to pursue a full course of study as defined by 8 CFR 214.2(f)(6); I am a designated official of the above named school and am authorized to issue this form. Tanya DePass Object Official Student A- Tanya DePass Object Official Student A- Tanya DePass Object Official Student A- Tanya DePass								
	Name of School Official Signature of Designated	School Official Title		ce Issued (city and state)					
11	Student Certification: I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay as specified or page 2. 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 course of study at the school named on page 1 of the form. I also authorize the named school to release any information from my records which is needed by the INS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. VA								
	Name of Student Signature of Student Date								
	Name of parent or guardian Signature of If student under 18	parent or guardian	Address (city) (State or Province) (Country) (Date)					

IF YOU NEED MORE INFORMATION CONCERNING YOUR F-1 NONIMMIGRANT STUDENT STATUS AND THE RELATING IMMIGRATION PROCEDURES, PLEASE CONTACT EITHER YOUR FOREIGN STUDENT ADVISOR ON CAMPUS OR A NEARBY IMMIGRATION AND NATURALIZATION SERVICE OFFICE.

SEVIS

FAMILYNAME: Jurkovi	.c	FIRST NAME: _	Iva		Student's Copy
Primary Major: 52.0201	Business Administration and	Management,			N0009505822
Student Employment Author	orization:				N0009303822
Employment Status:	Typ	oe:			
Duration of Employment - Fro		(Date):			WEST CONTROL OF THE SECOND OF
Employer Name:					E2526588
Employer Location:					
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Current Authorizations:		Start Date:	End Date:		
Current Authorizations.		Start Date.	End Date:		
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This page when properly er	ndorsed, may be used for reentry of the	student to attend the sa	me school after a t	emporary abse	nce from the United States
Each certification signature	is valid for one year	District to district the Do	and boneon anter a t	emperary acce	nee from the officed states.
Name of School:					
Tunic of Belloof.		International St	udent A-		
anya DePass		dvisor/SEVIS Coo	rdinator	06/29/2012	Chicago, IL
Name of School Official	Signature of Designated School Official	Title			
rame of School Official	Signature of Designated School Official	Tiue		Date Issued	Place Issued (city and state)
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Name of School Official	Signature of Designated School Official	Tid.		Det I - 1	Di- I III
rame of School Official	Signature of Designated School Official	Title		Date Issued	Place Issued (city and state)