Microfilm Index Number

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 First (given) Name: Middle Name:		For Immigration Official User		Student's Copy N0009505822
Iva	imode rame.			
Country of birth: CROATIA	Date of birth(mo/day/year): 07/25/1985			0.23%
Country of citizenship: CROATIA	Admission number:			100
School (School district) name: Illinois Institute of Technology Main Campus	gret			
School Official to be notified of student's arrival Shannon Ingleby	in U.S.(Name and Title):			200
International Student Advisor School address (include zip code): 3201 S. State Street		Visa issuing post	Date Visa Issued	
MTCC Room 203 Chicago, IL 60616-3793 School code (including 3-digit suffix, if any) and	approval date:	1		150
CHI214F00379000	approved on01/09/2003	Reinstated, extension	granted to:	
 This certificate is issued to the student named above for: Continued attendance at this school. 				
 Level of education the student is pursuing 	g or will pursue in the United States:	1		
BACHELOR'S The student named above has been accep				
school, majoring in Business Administration and Management. The student is expected to report to the school no later than 02/01/2013 and complete studies not later than 05/17/2014. The normal length of study is 72 months. English proficiency: This school requires English proficiency. The student has the required English proficiency.		Specify type: Family Funds		onths given in item 7). \$0.00 \$28,500.00 Student Scholar \$83,830.00
7. This school estimates the student's avera	ge costs for an academic term of	d. On-campus	employment Total	\$ 0.00 \$ 112,330,00
9 (up to 12) months to be: a. Tuition and fees b. Living expenses c. Expenses of dependents (0) d. Other (specify): Total	\$ 38.850.00 \$ 12.000.00 \$ 0.00 \$ 0.00 \$ 50,850.00	9. Remarks: Post	completion OPT	in Business
and is true and correct; I executed this for the student's application, transcripts, or execution of this form; the school has de will be required to pursue a full course of to issue this form. Shannon Ingleby Name of School Official Signature of	rm in the United States after review a other records of courses taken and pro- termined that the above named studen if study, as defined by 8 CFR 214.2(f)(and evaluation in the Union of of financial responsion it's qualifications meet 6); I am a designated outlineal Student A-	nited States by me o ibility, which were n all standards for ad ifficial of the above	or other officials of the school of received at the school prior to the mission to the school; the student named school and am authorized 014 Chicago, IL
 Student Certification: I have read and ag page 2. I certify that all information pro- seek to enter or remain in the United Stat 	greed to comply with the terms and covided on this form refers specifically	to me and is true and c	orrect to the best of	extension of stay as specified on my knowledge. I certify that I
form. I also authorize the named school my nonimmigrant status.				
Name of Student	A.C. \$ignapar	MCCVIC of Student		CHO5/2014
V			· · · · · · · · · · · · · · · · · · ·	(6)
Name of parent or guardian S If student under 18	Signature of parent or guardian	Address (city)	(State or Province)	(Country) (Date)
Form I-20 A-B (Rev. 04-27-88)N			For	Official Use Only

SEVIS

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.

FIRST NAME: FAMILYNAME: Jurkovic Student's Copy Primary Major: 52.0201 Business Administration and Management N0009505822 Student Employment Authorization: OPT Employment Status: FULL TIME Type: Duration of Employment - From (Date): 05/19/2014 To (Date): 05/18/2015 Employer Name: Employer Location: The Student has met the 1 full academic year requirement. Comments: Post completion OPT in Business Administration & Management PART TIME Type: CPT Employment Status: To (Date): 05/17/2014 Duration of Employment - From (Date): 01/09/2014 Employer Name: V3 Markets, LLC 600 W. Chicago Employer Location: Chicago, IL 60654 To enhance coursework with practical application Comments: Company name change effective 2/1/2014. Formerly Infinium Capital Mgt. Event History Event Name: Event Date: 02/18/2013 Registration Current Authorizations: Start Date: End Date: CPT Employment 05/17/2014 01/09/2014 05/19/2014 OPT Employment Requested 05/18/2015 This page when properly endorsed, may be used for reentry of the student to attend the same school after a temporary absence from the United States. Each certification signature is valid for one year. Name of School: International Student A-Shannon Ingleby dvisor 03/03/2014 Chicago, IL Name of School Official Signature of Designated \$chool Title Date Issued Place Issued (city and state) Name of School Official Signature of Designated School Official Title Date Issued Place Issued (city and state) Name of School Official Title Signature of Designated School Official Date Issued Place Issued (city and state)

Title

Date Issued

Place Issued (city and state)

Signature of Designated School Official

Name of School Official