

SEVIS ID: N0015304998

SURNAME/PRIMARY NAME Rupawala	GIVEN NAME Ibrahim Firozbbhai	CLASS F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Ibrahim Firozbbhai Rupawala	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
DATE OF BIRTH 21 AUGUST 1991	ADMISSION NUMBER	
FORM ISSUE REASON INITIAL ATTENDANCE	LEGACY NAME	

SCHOOL INFORMATION

SCHOOL NAME San Francisco State University (SFSU) Graduate Division	SCHOOL ADDRESS Administration Building, Room 254, San Francisco, CA 94132
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Jackson Calder International Admissions Evaluator	SCHOOL CODE AND APPROVAL DATE SFR214F00630006 24 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Engineering, General 14.0101	MAJOR 2 None 00.0000
NORMAL PROGRAM LENGTH 36 Months	PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient
PROGRAM START DATE 14 JANUARY 2016	PROGRAM END DATE 14 JANUARY 2019	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 13,694	Personal Funds	\$ 0
Living Expenses	\$ 19,781	Funds From This School	\$
Expenses of Dependents (0)	\$ 0	Family Funds	\$ 33,475
Other	\$	On-Campus Employment	\$
TOTAL	\$ 33,475	TOTAL	\$ 33,475

REMARKS

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	PLACE ISSUED
SIGNATURE OF: Jackson Calder, International Admissions Evaluator	09 October 2015	San Francisco, CA

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(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

X		
SIGNATURE OF: Ibrahim Firozbbhai Rupawala	DATE	
	X	
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)
		DATE

SEVIS ID: N0015304998 (F-1)

NAME: Ibrahim Firozbhai
Rupawala

EMPLOYMENT AUTHORIZATION

EMPLOYMENT STATUS	TYPE
EMPLOYMENT START DATE	EMPLOYMENT END DATE
EMPLOYER NAME	EMPLOYER LOCATION
COMMENTS	

CHANGE OF STATUS/CAP-GAP EXTENSION

REQUESTED VISA TYPE	REQUEST/PETITION STATUS	RECEIPT NUMBER	BENEFIT START DATE/REQUEST DATE
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EVENT HISTORY

EVENT NAME	EVENT DATE
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OTHER AUTHORIZATIONS

AUTHORIZATION	START DATE	END DATE
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TRAVEL ENDORSEMENT

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.

SCHOOL OFFICIAL	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
		X		
		X		
		X		
		X		