

3141 Chestnut Street Main Building, Suite 222

Phone: 215.895.2502: Email: lSSS@drexel.edu
Office Hours: Monday – Friday, 9am – 5pm EST

I-20/DS-2019 Registration Form

Per federal registrations, F-1 and J-1 visa holders are required to register with the International Students and Scholars Services Office (ISSS) upon arrival to the US, or shortly after receiving approval for a change of status.

Family/Last Name:	Given/First Na	nme:	
Student ID Number:	US Phone Nun	US Phone Number:	
Non-Drexel Email:	If you do not have a US phone number, leave blank and remember to update ISSS as soon as you have one.		
US Address:	·		
Street Address:	APT	APT/Unit/Room:	
City:	State:	Zip Code:	
Emergency Contact Information for Contact's Name:		needed if you have one) ationship:	
Email:	Phone Number:		
Contact's Name: Email:	Relationship: Phone Number:		
my visa. I understand the requirements of visa.	page 2 of my DS-2019 outloof my visa and the responsi	emergency contacts in case of an	
By signing/typing my name below, Student's Signature: (Type or sign)		ion provided is accurate.	