

SEVIS ID: N0030316332

SURNAME/PRIMARY NAME Mustapha	GIVEN NAME Abdulasheed	<b>Class of Admission</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
PREFERRED NAME Abdulasheed Mustapha	PASSPORT NAME	
COUNTRY OF BIRTH NIGERIA	COUNTRY OF CITIZENSHIP NIGERIA	
DATE OF BIRTH 06 MAY 1994	ADMISSION NUMBER	
FORM ISSUE REASON INITIAL ATTENDANCE	LEGACY NAME	

**SCHOOL INFORMATION**

SCHOOL NAME Maharishi University of Management Maharishi University of Management	SCHOOL ADDRESS 1000 North 4th Street, Fairfield, IA 52557
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Nena Honkanen MSCS Admissions Rep	SCHOOL CODE AND APPROVAL DATE OMA214F00553000 27 JANUARY 2003

**PROGRAM OF STUDY**

EDUCATION LEVEL MASTER'S	MAJOR 1 Computer Science 11.0701	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 10 JULY 2019
START OF CLASSES 12 AUGUST 2019	PROGRAM START/END DATE 09 AUGUST 2019 - 09 APRIL 2022	

**FINANCIALS**


<b>ESTIMATED AVERAGE COSTS FOR: 8 MONTHS</b>		<b>STUDENT'S FUNDING FOR: 8 MONTHS</b>	
Tuition and Fees	\$ 15,530	Personal Funds	\$ 0
Living Expenses	\$ 9,100	Funds From This School	\$
Expenses of Dependents (0)	\$	sponsor + req'd practicum/internship	\$ 25,130
Emergency Expenses	\$ 500	On-Campus Employment	\$
TOTAL	\$ 25,130	TOTAL	\$ 25,130

**REMARKS**

\$5,000 from sponsor, \$20,130 from practical training internship which is a required part of the degree for which they receive academic credit and financial support to cover the remainder of the program costs.


**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 18 April 2019	PLACE ISSUED Fairfield, IA
SIGNATURE OF: Nena Honkanen, MSCS Admissions Rep		

**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 	27 April 2019		
SIGNATURE OF: Abdulasheed Mustapha	DATE		
X			
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE