

SEVIS ID: N0027443242

SURNAME/PRIMARY NAME Chatterjee	GIVEN NAME Saptarshi	<b>Class of Admission</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
PREFERRED NAME Saptarshi Chatterjee	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
DATE OF BIRTH 08 JUNE 1986	ADMISSION NUMBER	
FORM ISSUE REASON INITIAL ATTENDANCE	LEGACY NAME	

**SCHOOL INFORMATION**

SCHOOL NAME Illinois Institute of Technology Main Campus	SCHOOL ADDRESS 3201 S. State Street, MTCC Room 203, Chicago, IL 60616
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Jessica Heileman Associate Director	SCHOOL CODE AND APPROVAL DATE CHI214F00379000 09 JANUARY 2017

**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 09 DECEMBER 2017
START OF CLASSES 08 JANUARY 2018	PROGRAM START/END DATE 08 JANUARY 2018 - 16 MAY 2020	

**FINANCIALS**

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 30,735	Personal Funds	\$ 44,279
Living Expenses	\$ 13,500	Funds From This School	\$
Expenses of Dependents (0)	\$	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 44,235	TOTAL	\$ 44,279

**REMARKS**

Conferred Bachelors degree required

**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 19 October 2017	PLACE ISSUED Chicago, IL
SIGNATURE OF: Jessica Heileman, Associate Director		

**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: Saptarshi Chatterjee	DATE	
X		
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country) DATE