

# भारत गणराज्य

REPUBLIC OF INDIA

**टाईप / Type**

**P**

**राष्ट्र कोड / Country Code**

IND

पासपोर्ट नं. / Passport No.

**उपनाम / Surname**

**M 8864670**

**SHENOY**

दिया गया नाम / Given Name(s)

**VARUN DILIP**

**राष्ट्रीयता / Nationality**

**लिंग / Sex**

**जन्मतिथि / Date of Birth**

# INDIAN

M

15/12/1997

जन्म स्थान / Place of Birth

**MANGALORE, KARNATAKA**

जारी करने का स्थान / Place of Issue

**MUMBAI.**

जारी करने की तिथि / Date of Issue

**समाप्ति की तिथि / Date of Expiry**

14/05/2015

13/05/2025

P<INDSHENOY<<VARUN<DILIP<<<<<<<<<<<<<<<<<<<

M8864670<5IND9712157M2505130<<<<<<<<<<<<<<<<2



**EMIGRATION CHECK REQUIRED**

पिता / कानूनी अभिभावक का नाम / Name of Father / Legal Guardian

**DILIP SADASHIV SHENOY**



M8864670

माता का नाम / Name of Mother

**VIDYA DILIP SHENOY**

पति या पत्नी का नाम / Name of Spouse

पता / Address

**A-11/103, YASHASHREE, SAI ROAD, GOKULDHAM**

**GOREGAON (EAST), MUMBAI**

**PIN: 400063, MAHARASHTRA, INDIA**

पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एवं स्थान / Old Passport No. with Date and Place of Issue

फाईल नं. / File No.

**B01068709851215**



# UNITED STATES OF AMERICA

Control Number

20211949920010

to form

Visa Type /Class

R FI

Birth Date

**Sex**

Nationality

Passport Number

M8864670

三

15DEC1997

IND

## Entries

Issue Date

Expiration Date

M Blessings for Libby  
15 JUL 2021

15 JUL 2021

12 JUL 2026

1011

## Annotation

N0031936084

UNIVERSITY OF CALIFORNIA, IRVINE: R0639290  
NIE UNDER ALL P.P.S ON NOVEL CORONAVIRUS

NIE UNDER ALL P.P.'S ON NOVEL CONJUNCTIVES

[illegible]

M8864670<5IND9712157M2607126F1BMB1Y6YJ042297

**Department of Homeland Security**  
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status  
OMB NO. 1653-0038

**SEVIS ID: N0031936084**

<b>SURNAME/PRIMARY NAME</b> SHENOY	<b>GIVEN NAME</b> VARUN DILIP	<b>Class of Admission</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
<b>PREFERRED NAME</b> VARUN DILIP SHENOY	<b>PASSPORT NAME</b>	
<b>COUNTRY OF BIRTH</b> INDIA	<b>COUNTRY OF CITIZENSHIP</b> INDIA	
<b>CITY OF BIRTH</b> MANGALORE	<b>DATE OF BIRTH</b> 15 DECEMBER 1997	
<b>FORM ISSUE REASON</b> CONTINUED ATTENDANCE - UPDATED	<b>ADMISSION NUMBER</b>	

**SCHOOL INFORMATION**

<b>SCHOOL NAME</b> UNIVERSITY OF CALIFORNIA, IRVINE UNIVERSITY OF CALIFORNIA, IRVINE	<b>SCHOOL ADDRESS</b> INTERNATIONAL CENTER, G 302 UCI Student Center, Irvine, CA 92697
<b>SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL</b> Archana Sheth Associate Director	<b>SCHOOL CODE AND APPROVAL DATE</b> LOS214F01962000 29 JANUARY 2003

**PROGRAM OF STUDY**

<b>EDUCATION LEVEL</b> MASTER'S	<b>MAJOR 1</b> Computer Science 11.0701	<b>MAJOR 2</b> None 00.0000
<b>PROGRAM ENGLISH PROFICIENCY</b> Required	<b>ENGLISH PROFICIENCY NOTES</b> Student is proficient	<b>EARLIEST ADMISSION DATE</b> 21 AUGUST 2021
<b>START OF CLASSES</b> 20 SEPTEMBER 2021	<b>PROGRAM START/END DATE</b> 20 SEPTEMBER 2021 - 09 DECEMBER 2022	

**FINANCIALS**

<b>ESTIMATED AVERAGE COSTS FOR: 9 MONTHS</b>		<b>STUDENT'S FUNDING FOR: 9 MONTHS</b>	
Tuition and Fees	\$ 34,958	Personal Funds	\$ 55,958
Living Expenses	\$ 21,000	Funds From This School	\$
Expenses of Dependents (0)	\$	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
<b>TOTAL</b>	<b>\$ 55,958</b>	<b>TOTAL</b>	<b>\$ 55,958</b>

**REMARKS**

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**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.

<b>SIGNATURE OF:</b> Archana Sheth, Associate Director	<b>DATE ISSUED</b> 13 May 2022	<b>PLACE ISSUED</b> Irvine, CA
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**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.**

<b>SIGNATURE OF:</b> VARUN DILIP SHENOY	<b>DATE</b>
<b>SIGNATURE</b>	<b>DATE</b>
<b>NAME OF PARENT OR GUARDIAN</b>	<b>ADDRESS (city/state or province/country)</b>
<b>SIGNATURE</b>	<b>DATE</b>



**Department of Homeland Security**  
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status  
OMB NO. 1653-0038

**SEVIS ID: N0031936084 (F-1)**

**NAME: VARUN DILIP SHENOY**

**EMPLOYMENT AUTHORIZATIONS**

TYPE	FULL/PART-TIME	STATUS	START DATE	END DATE
CPT	FULL TIME	APPROVED	13 JUNE 2022	09 SEPTEMBER 2022

**EMPLOYER INFORMATION**

TYPE	AUTHORIZATION DATES			
CPT	13 JUNE 2022 - 09 SEPTEMBER 2022			
EMPLOYER NAME	START DATE	END DATE	CITY & STATE	
WEPAY	13 JUNE 2022	09 SEPTEMBER 2022	REDWOOD CITY, CA	

**CHANGE OF STATUS/CAP-GAP EXTENSION**

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**AUTHORIZED REDUCED COURSE LOAD**

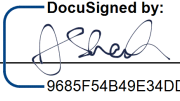
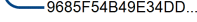
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**CURRENT SESSION DATES**

CURRENT SESSION START DATE	CURRENT SESSION END DATE
23 MARCH 2022	10 JUNE 2022

**TRAVEL ENDORSEMENT**

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Archana Sheth	Associate Director	X 	5/18/2022	Irvine, CA
		X 		
		X		
		X		
		X		

**Department of Homeland Security**  
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status  
OMB NO. 1653-0038

## INSTRUCTIONS TO STUDENTS

**STUDENT ATTESTATION.** You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**FORM I-20.** The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

**VISA APPLICATION.** You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

**ADMISSION.** When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

**REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA.** Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

**EMPLOYMENT.** Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

**PERIOD OF STAY.** You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

**EXTENSION OF PROGRAM.** If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

**SCHOOL TRANSFER.** To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

**NOTICE OF ADDRESS.** When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

**REENTRY.** F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

**AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL.** DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

**PENALTY.** To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

## INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

**ISSUANCE OF FORM I-20.** DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

**ENDORSEMENT OF PAGE 2 FOR REENTRY.** If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

**RECORDKEEPING.** DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

**AUTHORITY FOR COLLECTING INFORMATION.** Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

**REPORTING BURDEN.** U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.

**Certificate Of Completion**

Envelope Id: 1EF01996B1684927B31E744769C2E79F

Status: Completed

Subject: I-20 with CPT Recommendation Updated

Source Envelope:

Document Pages: 3

Signatures: 2

Envelope Originator:

Certificate Pages: 1

Initials: 0

Archana Sheth

AutoNav: Enabled

415 Aldrich Hall

Envelope Stamping: Enabled

Irvine, CA 92697-1025

Time Zone: (UTC-08:00) Pacific Time (US &amp; Canada)

asheth@uci.edu

IP Address: 128.200.199.35

**Record Tracking**

Status: Original

Holder: Archana Sheth

Location: DocuSign

5/18/2022 9:21:13 AM

asheth@uci.edu

**Signer Events**

Archana Sheth

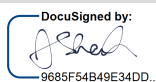
asheth@uci.edu

Associate Director

UCI Account

Security Level: Email, Account Authentication  
(None)**Signature**

DocuSigned by:



9685F54B49E34DD...

Signature Adoption: Uploaded Signature Image

Signed by link sent to asheth@uci.edu

Using IP Address: 128.200.199.35

**Timestamp**

Sent: 5/18/2022 9:21:48 AM

Viewed: 5/18/2022 9:21:54 AM

Signed: 5/18/2022 9:22:31 AM

Freeform Signing

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

**In Person Signer Events****Signature****Timestamp****Editor Delivery Events****Status****Timestamp****Agent Delivery Events****Status****Timestamp****Intermediary Delivery Events****Status****Timestamp****Certified Delivery Events****Status****Timestamp****Carbon Copy Events****Status****Timestamp**

Varun Shenoy

VDSHENROY@UCI.EDU

Security Level: Email, Account Authentication  
(None)

**COPIED**

Sent: 5/18/2022 9:22:32 AM

Viewed: 5/18/2022 9:52:38 AM

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

**Witness Events****Signature****Timestamp****Notary Events****Signature****Timestamp****Envelope Summary Events****Status****Timestamps**

Envelope Sent

Hashed/Encrypted

5/18/2022 9:21:48 AM

Certified Delivered

Security Checked

5/18/2022 9:21:54 AM

Signing Complete

Security Checked

5/18/2022 9:22:31 AM

Completed

Security Checked

5/18/2022 9:22:32 AM

**Payment Events****Status****Timestamps**

For: **VARUN DILIP SHENOY**

## Most Recent I-94

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**Admission (I-94) Record Number : 651719714A2**

**Most Recent Date of Entry: 2021 August 23**

**Class of Admission : F1**

**Admit Until Date : D/S**

**Details provided on the I-94 Information form:**

**Last/Surname : SHENOY**  
**First (Given) Name : VARUN DILIP**  
**Birth Date : 1997 December 15**  
**Passport Number : M8864670**  
**Country of Issuance : India**

[Get Travel History](#)

► Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

► If an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

► Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

OMB No. 1651-0111  
Expiration Date: 09/30/2021

[For inquiries or questions regarding your I-94, please click here](#)

[Accessibility](#) | [Privacy Policy](#)



**Employee's Withholding Certificate**

OMB No. 1545-0074

- ▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**  
 ▶ **Give Form W-4 to your employer.**  
 ▶ **Your withholding is subject to review by the IRS.**

**2022****Step 1:  
Enter  
Personal  
Information**

(a) First name and middle initial <b>Varun</b>	Last name <b>Shenoy</b>	(b) Social security number <b>652-11-4433</b>
Address <b>3700 Parkview Ln Apt 3C</b>		▶ <b>Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a>.</b>
City or town, state, and ZIP code <b>Irvine, CA - 92612</b>		
(c) <input checked="" type="checkbox"/> <b>Single or Married filing separately</b> <input type="checkbox"/> <b>Married filing jointly or Qualifying widow(er)</b> <input type="checkbox"/> <b>Head of household</b> (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App), and privacy.

**Step 2:  
Multiple Jobs  
or Spouse  
Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

- (a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3-4); or  
 (b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; or  
 (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . ▶ ☐

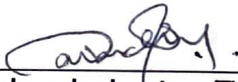
**TIP:** To be accurate, submit a 2022 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.)

<b>Step 3: Claim Dependents</b>	If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly): Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$ <b>0.00</b> Multiply the number of other dependents by \$500 . . . ▶ \$ <b>0.00</b> Add the amounts above and enter the total here . . . . .	<b>3</b>	\$	<b>0.00</b>
<b>Step 4 (optional): Other Adjustments</b>	(a) <b>Other income (not from jobs).</b> If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . .	<b>4(a)</b>	\$	<b>0.00</b>
	(b) <b>Deductions.</b> If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . .	<b>4(b)</b>	\$	<b>0.00</b>
	(c) <b>Extra withholding.</b> Enter any additional tax you want withheld each pay period . . . <b>NON-RESIDENT ALIEN</b>	<b>4(c)</b>	\$	<b>0.00 / NRA</b>

**Step 5:  
Sign  
Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

▶ 

**Employee's signature** (This form is not valid unless you sign it.)

▶ **07-19-2022**  
**Date**

**Employers  
Only**

Employer's name and address <b>Wepay, Inc., 350 Convention Way, Redwood City, CA - 94063</b>	First date of employment <b>06-13-2022</b>	Employer identification number (EIN) <b>80-0250758</b>
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