

International Student Center Request for I-20/DS-2019 Replacement Leave of Absence Form



Please allow 5-7 business days to process this request.

Visa Status F-1 □ J-1 Red IDi	¥818481567						
Last Name Boddu First Na	me <u>Soumya</u>						
Major <u>Electrical Engineering</u> Undergraduate	e ☑ Graduate ☐ Exchange						
Email _soumyab.sb@gmail.com Phone	6194149710						
ocal Address 2035 W El Camino ave, Apt #283, Sacramento, CA - 95833							
Are you sponsored by your home government or the U.S	S. government? No						
Reason for Request (Check one):							
Replacement I-20 or DS-2019	Add Dependent						
☐ Lost or Stolen	Please attach:						
□ Damaged	 Copy of Dependent's Passport Bio Page 						
□Travel	Completed Financial Statement Form						
☑OPT Update	 Required amount shown on second page Bank Statement/Proof of Funds 						
Uother:	Complete section on the back of this page						
☐ Program Extension	Leave of Absence						
☐ I-20	You MUST make an appointment with an International						
☐ DS-2019	Student Advisor.						
Current I-20 Program End Date	Semester & Year of Leave:						
Expected Date of Completion	Fall Spring						
	Expected Semester of Return						
Please attach: • Financial Statement Form	Expected Time Outside the US:						
Bank Statement/Proof of Funds Bank Statement	☐ Long-term leave of absence - More than 5 months						
 Undergraduate Students - Degree Audit Report Graduate Students - Letter from Graduate Advisor 	☐ Short-term leave of absence - Less than 5 months						
for second extension or more	Reason for Leave:						
☐ Changes to Personal Information	Study Abroad (Attach proof of study abroad placement)						
□ Name Change:	☐ Medical (Attach documentation from medical						
First Name Last Name	doctor, if not leaving US)						
☐ Financial	☐ Visa Delay						
Please attach:	☐ Family Concerns						
For name change - copy of passport	Financial						
For change of funding - copy of Financial Documents	Other						
☐ Change of Status	Returning from Leave of Absence:						
You MUST make an appointment with an international student advisor. Please attach:	Date returning to U.S.						
Copy of Passport Biographic Page	Date of visa appointment						
Financial Statement Form	(if required)						
Proof of Funds/Bank StatementComplete section on the back of this page	 Please attach flight information 						

I-20 Delive	ry Options					
☐ I-20	will be picked up at t	he ISC				
	ndard mail requested 5 W El Camino Ave, Apt		34 05000	ing address:		
	d by express mail. Yo		for shipping of	lirectly through	eShip Global.	Go to University
	Required if being	g sent internationall	у			
Change of	Status					
	igration Status k one: F-1 □F	-2 □J-1 □J-2	. □ H-1B □]H-4 □B-1/	B-2 ☐ Other _	
Sex: 🗆 Male	e Female Da	te of Birth				
Country of B	Sirth	C	ountry of Citiz	enship		
Changing St	atus:	Home Country _			(flight depa	arture date)
Local Addre	ss in San Diego: Stre			Apt/Room	1	
	City	<i>r</i> :		State:	Zip Code_	
Permanent A	Address in Home Co	untry: Street Addre	ess			
City:		State/Province	Pos	Postal Code Country		
Emergency	Contact Information:					
Name		Phone		Email		
Dependen	t Information					
Spouse/ Child	Family Name	First Name	Date of Birth MM/DD/YY YY	City of Birth	Country of Birth	Country of Citizenship
	the information abovental documents mus					processed,
Signature _			Date _			_
	Only					
	nd Date					