

Office of International Admissions and Programs

Agency Partner Student Information Form

Please upload this completed form to IRA Portal within 20 days of student's application date

| Agency Partner | |
|---|---|
| Agency Name:Agent Representat | ive Name: |
| Signature of Agent Representative: | Date: |
| Student Information | |
| First Name: Sai Venkata Satish Last Name: | Yenduri |
| Date of Birth: 1st August 1995 Citizenship: | |
| Address: Flat no.102, Sai mamata residency, Gokul Plots Address 2: R | adha Krishna Road, Venkata Ramana Colony |
| City: Hyderabad Postal Code: 500085 | Country:India |
| Email: Yendurisatish@gmail.com Skype: | endurisatish |
| Select your degree type: □ Bachelor ✓ Master □ Doctoral Preferred D | egree Program: |
| Semester Start Date: | |
| As per the Student Exchange and Visitor Program federal policy of 06/04/19, Designated Scl authorized torelease the Form I-20 directly to non-immigrant students, their depend guardian. The Form I-20 will be mailed directly to the applicant using address indicates the students of the students. | lents, or, for minors, to their parent or legal |
| Comments: | |
| | |
| | |
| | |