

The International Students Office

Massachusetts Institute of Technology

I-20 REQUEST FORM

IIT ID#	Email addra	First name	Middle	
	Email addre			
ate of birth:(month/day/yea	ar)	Marital Status:	Sex:	
country of birth:		Country of citizenship:		
ddress in home country:	Address line 1:			
	Address line 2:			
	City:			
	Postal Code:	Country:		
ocal US address:	Address line 1:			
	Address line 2:			
	City: State:		Zip Code:	
dmission No. (from I-94 card):		Is D/S (duration of studies) written on the I-94 card?:		
S Visa expiration date:		Passport expiration date:		
ircle one: Currently i			post-completion practical training	
Sex	nt (last, first) Birth date hip	_ Country of birth		
Name of dependen	t (last, first)	☐ husband	l	
	nt (last, first <u>)</u> Birth date			
Sex		Country of birth		
Sex	Birth datehip	Country of birth Country of permanent residen	ce	
Sex Country of citizens Name of depender Sex	Birth datehip hip It (last, first) Birth date	Country of birth Country of permanent residen	ce I □ wife □ son □ daughter	
Sex	Birth date hip It (last, first) Birth date hip of funding (supply documentation) e program (must submit copy of acceptance	Country of birth Country of permanent resident	ce	
Sex Country of citizens Name of depender Sex Country of citizens Change of source of I-515 Change of visa type Change of degree	Birth date hip It (last, first) Birth date hip of funding (supply documentation) e program (must submit copy of acceptance	Country of birth	ce	
Sex Country of citizens Name of depender Sex Country of citizens Change of source of I-515 Change of visa typ Change of degree Other (please expla	Birth date hip It (last, first) Birth date hip of funding (supply documentation) e program (must submit copy of acceptance From SB to SM From SB to PhD ain):	Country of birth	ce	
Sex	Birth date hip It (last, first) Birth date hip of funding (supply documentation) e program (must submit copy of acceptance From SB to SM From SB to PhD ain):	Country of birth husband Country of birth husband Country of birth Country of permanent resident country of permanent resident country of permanent resident country of permanent and proof From SM to PhD From Special to R	ce	

(CONTINUED on reverse)

2015 - 2016 GUIDELINES for RA and TA Stipends

School of Science Monthly stipend School of Engineering Monthly stipend RA \$2,874 RA (SM level) \$2,626 TΑ \$2,943 RA (PhD level) \$2,874 TA (support) \$2,653 TA (contact) \$2,943

Note: These figures were provided by the Graduate School Office as guidelines only. For exact figures, contact the department

SC

Personal and/or family funds:	\$	Yearly Estimate of Expenses	i	
Funds from MIT (indicate type):		Single Graduate Student	\$80,172	
□ RA □ TA □ Fellowship □ Loan	\$	Married Graduate Student (add \$3,000 per child)	\$90,540	
☐ Undergraduate Financial Aid ☐ Other	\$	Undergraduate Student (for 9 months only)	\$63,250	
	\$	*Figures are for 12 months. Th		
Funds from another source (please specify) Total:	*The estim special pro	*The estimates reflect regular of	imates reflect regular degree programs. Note that programs and some programs such as Sloan MBA	
e could result in the loss of your legal status in the Un RTANT: As an international student at MIT, you are not a full-time every semester, and that the validity of a mic level, funding, and/or completion of studies date a listatus and may suffer serious consequences.	responsible for maintain your immigration docum	ents does not expire. Be certain to re	port any changes in your ma	
		Tadada		
nt's signature <u>:</u>		10day s	s date:	
NOTE: Your signature certifies to		d you understand the above state	s date:	
NOTE: Your signature certifies to	Office U	d you understand the above state	ements.	
NOTE: Your signature certifies to	Office U	d you understand the above state	s date:ements.	
NOTE: Your signature certifies to	Office U	d you understand the above state	ements.	
NOTE: Your signature certifies to relive by:	Office U	d you understand the above state	ements.	
NOTE: Your signature certifies to relived by: SON FOR REQUESTING I-20 Initial attendance	Office U	d you understand the above state	ements.	
F o r eived by: SON FOR REQUESTING I-20 Initial attendance Continued attendance and other	Office U	d you understand the above state	ements.	
F o r eived by: SON FOR REQUESTING I-20 Initial attendance Continued attendance	Office U	Ise Only	ements.	
For SON FOR REQUESTING I-20 Initial attendance Continued attendance and other Use by dependent(s)	Office U	Ise Only	ements.	
For Peived by: SON FOR REQUESTING I-20 Initial attendance Continued attendance Continued attendance and other Use by dependent(s) Include birthdates	Office U	Ise Only	Date:	
For Peived by: SON FOR REQUESTING I-20 Initial attendance Continued attendance and other Use by dependent(s) Include birthdates School transfer	Office U	Ise Only	Date:	

__ MB

_CGP

___ JM

____ AB

revised 6/09/2015