

#### **Office of International Programs**

400 South Orange Ave., South Orange, NJ 07079; Phone: (973) 761-9072; Fax: (973) 275-2383; Email: oip@shu.edu

#### **I-20 APPLICATION**

Below is a checklist to help guide you through the process of applying for Form I-20. Once students have completed the I-20 Application, the Office of International Programs (OIP) will send an electronic Form I-20 to students via their email. Form I-20 allows international students to study at Seton Hall and apply for the F-1 visa (if applicable). **ESL students must be tested by the ESL department before the I-20 is created.** Please upload your documents to our portal here.

# I-20 Application Checklist

## All students applying for an I-20 must submit the following:

- 1. **I-20 Application** (page 2,3)
- 2. Passport copy biographical page only
- 3. Financial documents Please refer to page 4 for details on acceptable documents
- 4. Housing Support Documents (if applicable)
  - Housing Support Form (page 6)
  - Proof of Address

## **Transfer students must submit the following:**

- Transfer Visa Sponsorship Form (signed by DSO at current school)
- Most Recent I-20
- Most Recent I-94
- Most Recent F-1 Student Visa

# Change of status students must additionally submit copies of the following:

- Most Recent Visa
- Most Recent I-94
- Copies of DS-2019 (for J-1 visas only)



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# **I-20 APPLICATION**

All fields are mandatory, unless noted as optional

# **PART 1: STUDENT INFORMATION**

	IANI I.	STUDEN	1 INFORMA	ATION		
Write the name <b>EXACTLY</b> as it appears	s on your PASS	PORT				
Surname/Last Name:						
Primary/First Name: (please add any mi	iddle names)					
Gender: MALE FEMALE Date of Birth: (Month/Day/Year)					·)	
Phone Number:		Email Ad	dress: (mandato	ry)		
Country of Birth:	City of Birth:			Country	of Citizer	nship:
Will you be traveling with a spouse or c	hild(ren)?	Yes (you	ı will be require	ed to appl	y for the	F2 visa)No
	PART 2: A	DDRESS	INFORMA	ΓΙΟΝ		
Home Country Address: (required for	I-20)					
Street Address:					Apartme	ent/Unit #:
City:	Province:		Postal Code:		Country	:
U.S. Address: (only mandatory for stu	dents already i	n the U.S.)			L	
Street Address:					Apartme	ent/Unit #:
City:		State:				Zip Code:
	PART 3: AC	CADEMI	C INFORMA	TION		
Please choose the degree you are ap	plying for: (or	nline degr	ees and some o	certificat	es not eli	gible for I-20)
English as a Second Langu	uage Under	rgraduate	Graduate	Law	Ph.D.	Certificate
Choose the semester you applied for: Fall Spring Summer						
If applying for summer, which summer  May Intersession	er session will Summer I (Ju	•	? Summer	II (July)		
What major will you be studying?						



# **I-20 APPLICATION - Continued**

# **PART 4: F1 VISA HISTORY**

	17411	4: 11 VISA IIISI	OILI	
Are you currently on a	n F-1 visa status (including h		NO ( P C	
	· · · · · · · · · · · · · · · · · · ·	and then go to Part 6)	NO (go to Part 5)	
SEVIS ID Number: N00	Current School	Name:		Last Date Attended/Attending: (Month/Day/Year)
OPT End Date: (if applic (Month/Day				ed/completed, you must make an rst before transferring your record.
	PART	5: U.S. VISA HIST	ΓORY	
Are you here on anothe	er U.S. visa status (such as B2	or F2)? YES	NO (move onto	Part 6)
Current visa status:		Current status end da (Month/Day_		94 record, not visa in passport)
Will you file for change	of status in the United States? YES (please submit copy of c			ffice NO
	PART 6: AN	NUAL COST WO	RKSHEET	
Please complete the field Seton Hall University.	ls that apply to you below and	demonstrate how you w	vill support yourself e	each year during your study at
Source of my support p	er academic year – not all fie	elds below may apply t	o your situation	Annual Amount
	otal from the "Cost of Education gram (for example, an undergra			\$
2. <u>Personal Funds:</u>				\$
_	or 1: Sponsor's Name			\$
4. <u>Funds from Spons</u>	or 2: Sponsor's Name			\$
	t from Sponsor: Sponsor's Nar value of housing from page 8	me		\$
	licate the type of award you ar	e receiving each year (s	scholarship,	\$
	d write the amount in the space e cost of education written in b		ber must be EQUAL	
	DISCLAI	MER AND E-SIG	NATURE	<b>'</b>
	agree to the terms and conditions of or an I-20 is granted, I understand	* *	•	rue and complete to the best of my cation may result in termination.
E-Signature			Date (month/day/year)	,
By typing you	r name, you electronically sign this ap	plication		



## FINANCIAL DOCUMENTS CHECKLIST

Please refer to the chart below for the acceptable financial documents to complete your I-20 Application:

#### **Accepted Documents**

### \*All submitted documents must be in English\*

#### Students may submit any combination of the following types of funding:

- Personal funds
- Sponsor funds
- Loans
- Scholarships Seton Hall, government, etc.

<u>Personal Funds</u> – *If using personal funds, student does not need to submit a Financial Support Form* Students may submit a copy of their own bank statement.

#### **Financial Sponsor Funds:**

Each sponsor must submit all 3 documents:

- Financial Support Form promising an amount for 1 year of study
- Bank Statement showing the amount promised for 1 year
- Proof of Income (if unemployed, amount promised will be divided by number of years in the program)

#### Loans

Please submit an approval / conditional approval letter. The *date* of the letter must be within 6 months.

#### **Scholarships**

Please submit scholarship award letter from Seton Hall or funder/program

#### **Eligibility Criteria: Bank Statement/Letter**

- Less than 6 months old from date of submission
- In English (or translated into English)
- Name of account holder clearly stated
- Must indicate closing or final balance
- Must indicate the type of account (savings/checking) and currency

#### **Eligibility Criteria: Proof of Income**

- 1. Pay Stub
- 2. Letter from current employer or offer letter with company's letterhead.
- 3. Tax return
- 4. For self-employed individuals: Please follow the job letter template on page 6 of the this I-20 Application

#### **NOT ACCEPTABLE - FINANCIAL DOCUMENTS INCLUDE:**

Company bank statements	Investment accounts	College Board Form
Screen shots	Documents not in English	Documents in Word/Excel format



# **FINANCIAL SUPPORT FORM**

<u>Each sponsor</u> must complete and sign this form. Our Office reserves the right to request additional financial documents or verification of submitted documents.

PART 1: SPONS	OR PROMISE						
I promise that I will	promise that I will give the student, no less than U.S. \$						
(including annual t	(including annual tuition cost increase) for EVERY YEAR of the student's program of study at Seton Hall University.						
PART 2: SPONS	OR INFORMAT	ION					
My relationship to th	ne student is: Pa	arent(s) Sibling	g(s) Rela	tive(s) Friend(s)			
Surname/Last Name:	 :			Primary/First Nan	ne:		
Sponsor's Address:							
Street Address:					Apartment/Unit #:		
City:		Province:		Postal Code:	Country:		
Phone:	J		Email:				
			l				
PART 3: SPONS	OR EMPLOYM	ENT INFOR	MATION	- (Submit one of	the income documents below)		
Name of my employ	er:						
Annual Salary (U.S.)	D.):			Other Income (U.S	.D.):		
Pay Stub	I h Employment Le			ollowing required d Tax Return	ocuments: Self-employment Letter		
Tay State	Zimproyment Ze	mer (on remerine		Tun Hotain	sen employment Better		
PART 4: FINAN	CIAL SUPPORT						
I promise that for each							
Sponsor 1: By	checking this box,	I agree to the to	erms and co	nditions of this applic	cation.		
E-Signature of Sponsor 1 By typing your name, you electronically sign this application  Date (month/day/year)							
Sponsor 2: By Signature of 2 <sup>nd</sup> spo	checking this box, I	agree to the te	erms and cor	ditions of this applic	ation.		
E-Signature of Sponsor 2	By typing your name			Da (month/da	te		

[Company Logo]		
<u>Date</u>		
	name), owner of the company	
the student Financial Support Form) per	(student name) the financial suppo	ort amount of <mark>(amount on</mark>
• • • • • • • • • • • • • • • • • • • •	industry and has been active for	r a minimum of 2 years
· · · · —	,	•
-	in company activities and business processe	
, , ,	ise to support the above student with his/h	ier education expenses at Seton Hall
University, including annual	tuition cost increases.	
Thank you,		
[Signature]		



### **HOUSING SUPPORT FORM**

The Housing Support Form should only be completed if the student will be living with someone in the United States for <u>free</u>. Please research your residence's distance from Seton Hall University. Any addresses that have more than 1.5 hours away from campus will not be accepted.

F1 students that fail classes because of excessive absences will be in violation of their F1 status and will be terminated. Please ensure that your commute is comfortable and accessible for you to be a successful student at Seton Hall.

**Driver's License** 

**Bank Statement** 

**Property Tax Bill** 

Please provide a copy of one of the following documents:

**Utility Bill** 

**Lease or Deed Document** 

PART 1: SPONSO	OR INFORMATION					
Surname/Last Name:	Surname/Last Name: Primary/			irst Name:		
My relationship to the	e student is:					
Student's Name:						
Phone:		Email:				
The address where the	ne student will be living:					
Street Address:					Apartment/Unit #:	
City:	State:				Zip Code:	
PART 2: SIGNAT	URE					
I promise that for each	h year of his/her program of study	, I will provi	de housing	to the student.		
Sponsor 1: By	checking this box, I agree to the	e terms and	conditions	of this application.		
E-Signature of				Date		
Sponsor 1	(month/day/year)					
•	By typing your name, you electronically sign this application					
Sponsor 2: By	checking this box, I agree to the	terms and c	onditions of	of this application.		
	nsor only needed when the bank	account sul	omitted is a			
E-Signature of				Date		
Sponsor 2	By typing your name, you electronically	By typing your name, you electronically sign this application (month/day/year)				



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Main Campus (South Orange NJ) - SEVIS School Code: NEW214F00185000 Law School Campus - SEVIS School Code: NEW214F00185001 Interprofessional Health Sciences - SEVIS School Code NEW214F00185002

### TRANSFER OF VISA SPONSORSHIP FORM

PART 1: STUDENT INFORMATION (	To be completed by the student)					
Surname/Last Name:	Primary/First Name:					
Gender: MALE FEMALE	Date of Birth: (Month)	/(Day)/(Year)				
U.S. Phone Number:	Email Address:					
Do you intend to travel outside the United States before beginning your studies at Seton Hall  Date you will depart the U.S.:						
University? Yes No (Month)/(Day)/(Year)_						
If you answered <b>yes</b> above, will you need to ap						
Are you on OPT and still working? Yes	No If yes, please keep in mind y	you cannot work once your SEVIS record has been				
transferred to us. Date you will stop working	( Month)/(Day)	/(Year)				
Please indicate the Seton Hall campus where y						
South Orange Law Scho	ool Interprofessional Heal	th Sciences				
E-Signature By typing your name, you electronicall	y sign this application	Date				
		(month/day/year)				
1						
PART 2: SEVIS INFORMATION (To b	e completed by the Student Adviso	r or Designated School Official only)				
SEVIS ID Number: SE N00_	11					
Level of study pursued at your school: High	School Language Training Un	dergraduate Masters Ph.D. Other -				
Was the student pursuing a full course of study	? Yes No Last date of att	tendance:				
Did the student transfer to your school? Yes	No If yes, from what schools	?				
Please list any periods of approved curriculum	or optional practical training (CPT/O	PT):				
Please list and explain any authorized reduced	course loads (Medical/Academic):					
Please comment on any particular academic,	financial, social or cultural circums	tances that you believe might affect the student's				
education:						
PART 3: INTERNATIONAL STUDENT AI completed by the Student Advisor or Design		OOL OFFICIAL INFORMATION (To be				
Last Name:	First Name:	Title:				
Phone Number:	Email Address:					
School Name:						
School Address:						
By checking this box, I agree the information	ation about the student named above	is accurate and true.				
E-Signature		Date				
By typing your name above, you electronically	sign this application	(month/day/year)				

### Estimated Cost of Education for International Students for 2023-2024 Academic Year

All tuition and fees listed are only an estimate and are subject to change at any time.

Please visit <u>Tuition and Fees page</u> for the most updated published fees.

Undergraduate	Amount	English as Second Language	Amount
Tuition (Flat Rate Tuition between 12-18 credits per	\$48,670	Tuition (\$575 per course – 4 courses/per	\$4,600
semester) New Student Fee (one-time fee):	\$340	semester)	\$400
University Fee, Full-time (\$575 per semester)	\$1,150	International Student Fee (one-time fee)	\$100
MALI G	\$1,130	Recreation Center Fee –Optional	
Mobile Computing Fee, Full-time (\$315 per semester)	\$630		
International Student Fee (one-time fee)	\$400		\$5,100
Total Tuition & Fees:	\$51,190	Total Tuition & Fees:	· · · · · ·
<b>On-campus Housing</b> (\$11,850) and Meal Plan U-300 (\$5,860):	\$17,710	<b>On-campus Housing</b> (\$11,850) and Meal Plan U-300 (\$5,860:	\$17,710
Books & Supplies	\$400	Books & Supplies	\$400
Personal Expenses	\$1,700	Personal Expenses	\$1,700
Medical	\$2,403	Medical Insurance*	\$2,403
Insurance*	\$4,503	Total Other Expenses:	\$4,503
Total Other Expenses:			
otal Annual Cost for Undergraduate:	\$73,403	Total Annual Cost for ESL:	\$27,313

Law School	Amount	Graduate Programs (Rates range from \$1,405-1,520)	Amount
Full-Time Tuition Rate	\$65,020	Tuition (Based on \$1,405/credit and 9 credits/semester)	\$25,290
International Student Fee (one-time fee)	\$400	International Student Fee (one-time fee)	\$400
University Fee, Full-Time (\$420 per semester)	\$840	University Graduate Fee, Full-Time (\$200 per semester)	\$400
Technological Fee (\$460 per semester)	\$920	Technological Fee (\$275 per semester)	\$550
Total Tuition & Fees:	\$67,180	<b>Total Tuition &amp; Fees:</b>	\$26,640
Room and Board	\$17,280	Ora Manor Housing (double room and Meal plan 2)	\$15,262
Books & Supplies	\$1,400	Books & Supplies	\$400
Personal Expenses	\$7,094	Personal Expenses	\$1,700
Medical Insurance*	\$5,567	Medical Insurance*	\$5,567
<b>Total Other Expenses:</b>	\$14,061	Total Other Expenses:	\$7,667
<b>Total Annual Cost for Graduate Program:</b>	\$98,521	<b>Total Annual Cost for Graduate Programs:</b>	<b>\$49,569</b>

#### **Other Important Notes:**

Medical Insurance – All international students are required to enroll in the University's medical insurance plan. Students enrolled in insurance through their government scholarship (i.e., SACM), or their parents'/spouse's employment <u>in the U.S.</u> may be permitted to waive the University's insurance plan. No other exceptions will be made.

Graduate Certificate Programs – The only certificates eligible for an I-20: Graduate Business, UN Studies or Global Health Certificates

**F2 Dependents** - If you are bringing any dependents, you must complete the F2 Dependent Application for a Form I-20 (Page 11) and show additional financial information of \$7,500 per dependent (spouse or child(ren)).



### F-2 DEPENDENT APPLICATION FOR A FORM I-20 INSTRUCTIONS

Please visit Study in the States' webpage, <u>Bringing Dependents to the United States</u> to understand federal regulations and visa limitations on your dependents.

#### PART I: STUDENT INFORMATION

• Please provide information about the F-1 student in this section.

#### PART II: DEPENDENT/APPLICANT INFORMATION

- Please write your name EXACTLY as it appears on your PASSPORT.
  - o If any middle names add to the Primary/First field.
- Date of Birth should be written: DAY MONTH YEAR
- Provide us with your e-mail address, as this is the best way of communication between our office and yourself.

#### PART IV: FINANCIAL DOCUMENTATION

- Make sure bank statements are:
  - Less than 3 months old
  - o In English
  - Have the type of currency listed



## F-2 DEPENDENT APPLICATION FOR A FORM I-20

PART I: F-1 STUDENT INFORMATION				
Surname/Last Name	Primary/First Name			
Gender: MALE FEMALE	Date of Birth Day Month Year			
Phone Number	Email Address			

PART II: F-2	2 DEPENDENT/APPLIC	CANT INFORMAT	ΓΙΟΝ				
Name in pa	Name in passport: Attach a copy of your passport and marriage certificate for spouse or birth certificate for child(ren).						
Surname/La	st Name			Primary/First N	ame		
Gender	MALE	FEMALE		Date of Birth	Day	Month	Year
Phone Num	ber			Email Address			
Country of C	Citizenship			Country of Birth	1		
My Relation:	ship to the student is:	SPOUSE	CHI	LD			

### PART III: FINANCIAL SUPPORT DOCUMENTATION

I have attached the following financial documents in support of my application. You are allowed to use your current F-1 financial sponsor as a new sponsor. Please note that you must show funds equal to or more than \$7,500 per dependent (Spouse or child(ren))

Personal Financial Documents MUST submit Bank Statement within the past 3 months

Financial Sponsor Documents MUST submit Bank Statement within the past 3 months

DISCLAIMER AND SIGNATURE						
I certify that my answers are true and complete to the best of my knowledge. If my request for an I-20 is granted, I understand that false or misleading						
information in r	information in my application may result in termination of visa status. If applicant is under 18, the parent or guardian must sign below.					
Signature Date						
<u> </u>						