



Virginia Commonwealth University

Office of International Education
Request for Dependent I-20 for F-2 Status

This form is to be completed by F-1 students who wish to bring their spouse or children under 21 to the United States to live with them while they are studying at VCU. This form should not be completed if the spouse/child is just planning to visit for a short time. The appropriate status for the purpose of a short-term visit is the B-1/B-2 tourist visa. Also, this form should not be completed for fiancés, parents, friends or other relatives. Fiancés, parents, friends and other relatives must also apply for the B-1/B-2 tourist visa in order to visit the United States.

Last Name _____ First _____ Date _____

Student Birthday _____ SEVIS ID # N _____
(mm/dd/yyyy)

Current Address _____

City _____ State _____ Zip _____

Phone (___) _____ E-mail _____@vcu.edu

Please attach the following items to this request:

- the last four monthly bank statements showing deposit and withdrawal activity.
a current bank statement showing liquid funds of \$27,500 for F-1 student and at least \$5,000 U.S. dollars for each dependent.

Please complete the following information for each dependent that you wish to bring into the United States. If you have more than one dependant, please use the additional space on the back of this form.

Last Name _____ First Name _____

Middle Name _____ Date of Birth (MM/DD/YY) _____

Country of Birth _____ Country of Citizenship _____

Relation to Student _____ Gender _____

Will this dependent apply to VCU for admission? Yes No

If yes, when? Fall Spring Summer 20__

Updated 2006

Last Name _____ First Name _____

Middle Name _____ Date of Birth (MM/DD/YY) _____

Country of Birth _____ Country of Citizenship _____

Relation to Student _____ Gender _____

Will this dependent apply to VCU for admission? Yes No

If Yes, When _____, For what semester _____

Last Name _____ First Name _____

Middle Name _____ Date of Birth (MM/DD/YY) _____

Country of Birth _____ Country of Citizenship _____

Relation to Student _____ Gender _____

Will this dependent apply to VCU for admission? Yes No

If Yes, When _____, For what semester _____

Last Name _____ First Name _____

Middle Name _____ Date of Birth (MM/DD/YY) _____

Country of Birth _____ Country of Citizenship _____

Relation to Student _____ Gender _____

Will this dependent apply to VCU for admission? Yes No

If Yes, When _____, For what semester _____
