



INTERNATIONAL EXCHANGE STUDENT DATA (ISD) FORM

This information is required for issuance of the *Form I-20, Certificate of Eligibility for Nonimmigrant (F-1) Student Status* or *Form DS-2019, Certificate of Eligibility for Exchange Visitor (J-1) Status*, one or the other of which you will need in order to secure an F or J visa at a United States (U.S.) consular post, normally in your country of residence. The information you provide will be used to create or update your official record in the U.S. government's Student and Exchange Visitor Information System (SEVIS).

Personal Information

****Enter your names below exactly as they appear in your passport and include a copy of the photo/name page from your passport with this form.**

Family Name _____ First Name _____ Middle Name _____ Suffix _____

Preferred Name (in the order written in your home country – optional): _____

Gender: Male _____ Female _____ Marital Status: Single _____ Married _____ Divorced _____ Widowed _____

Date of Birth (Month/Day/Year) _____ ****PLEASE SPELL OUT YOUR BIRTH MONTH!**

*****YOUR BIRTHDATE MUST BE EXACTLY THE SAME AS YOUR PASSPORT.**

City & Country of Birth _____ Country or Countries of Citizenship _____

Which country's passport will you use to apply for the F-1 or J-1 visa and to travel to the U.S.? _____

Home/Mailing Address: Street _____

City _____ State/Province _____ Country _____ Postal Code _____

Telephone: Home _____ Cell _____

E-Mail _____

Current Home Institution's Name: _____

Address: Street _____

City _____ State/Province _____ Country _____ Postal Code _____

Telephone: Office _____ Cell _____

Name & E-Mail of your Home Institution's Exchange Advisor _____

Your Current Major at your Home Institution: _____

Duration of Exchange 1 Academic Semester Two Academic Semesters/1 Year

Applying to start in (write in year next to relevant term): Fall _____ Spring _____

MSMU Program Information

Check the major program that closely matches to your current major at your Home Institution:

- | | |
|--|---|
| <input type="checkbox"/> American Studies | <input type="checkbox"/> Child Development |
| <input type="checkbox"/> Applied Ethics | <input type="checkbox"/> Criminology |
| <input type="checkbox"/> Art | <input type="checkbox"/> Education (State Teaching Credentials) |
| <input type="checkbox"/> Biochemistry | <input type="checkbox"/> English |
| <input type="checkbox"/> Biological Sciences | <input type="checkbox"/> English and Business Administration |
| <input type="checkbox"/> Business Administration | <input type="checkbox"/> Ethics and Society |
| <input type="checkbox"/> Chemistry | <input type="checkbox"/> Film and Media |

- | | |
|---|--|
| <input type="checkbox"/> French/Francophone Studies | <input type="checkbox"/> Music |
| <input type="checkbox"/> Geospatial Criminology | <input type="checkbox"/> Philosophy |
| <input type="checkbox"/> Gerontology | <input type="checkbox"/> Political Science |
| <input type="checkbox"/> Global Politics | <input type="checkbox"/> Psychology |
| <input type="checkbox"/> Healthcare Policy | <input type="checkbox"/> Religious Studies |
| <input type="checkbox"/> History | <input type="checkbox"/> Social Work |
| <input type="checkbox"/> Journalism & New Media | <input type="checkbox"/> Sociology |
| <input type="checkbox"/> Liberal Studies | <input type="checkbox"/> Spanish and Business Administration |
| <input type="checkbox"/> Mathematics | <input type="checkbox"/> Spanish/Latin American Studies |

Delivery Information for Form I-20 or DS-2019

*Federal regulations do not permit the Form I-20 or DS-2019 to be sent electronically. To what address do you wish the paper copy of your Form I-20 or DS-2019 to be sent? ***PLEASE WRITE DOWN THE ZIP CODE and COMPLETE ADDRESS!*

Name: _____

Address: Street _____

City _____ **State/Province** _____ **Country** _____ **Postal Code** _____

Telephone: Home/Office _____ **Cell** _____

EVIDENCE OF FINANCIAL SUPPORT

Refer to the attached list of estimated expenses, then complete the following sections. Make additional copies of page 4, if you have more than one sponsor. Submit all required financial documentation along with this ISD form. Your Form I-20 or DS-2019 cannot be issued until you have demonstrated satisfactorily that sufficient funds will be available to cover your school and living expenses in the U.S. You should be prepared to present financial support documents at the time you apply for an F or J visa at a U.S. embassy or consular post abroad or apply for a change of nonimmigrant status to F-1 or J-1 in the U.S. You also may be asked to show documentation of your financial support when you enter the U.S.

Important Notes to Applicant Regarding Proof of Funding:

- Make and submit additional copies of the relevant page, if you have more than one financial sponsor.
- For each source of funding, attach corroborating financial documentation, either in English or with a certified English translation, dated no more than three months before its submission to Mount Saint Mary’s University.
- Documentation of scholarships and fellowships may be in the form of an official award letter from the school or sponsoring agency.
- Documentation of personal or sponsor funds must be provided either on this form or on an original sheet of the bank’s letterhead stationery. In either case, the documentation must bear a bank official’s signature, the bank’s stamp, or the bank’s seal. Documentation also may be provided in the form of a legally binding affidavit.
- Sponsors who are U.S. citizens, U.S. permanent residents, or legally present in the U.S. must submit a completed Form I-134 Affidavit of Support, with financial documentation in English dated no more than three months before its submission to Mount Saint Mary’s University. The form can be found on the Internet at <https://www.uscis.gov/sites/default/files/files/form/i-134.pdf>.

Section to Be Completed by Applicant

Enter the amount, in U.S. currency, available for your support from each source of funds during your exchange program and send evidence of the funds (bank statement) to Center for Global Initiatives at jhamaki@msmu.edu. If you are not the bank account holder, please have the bank account holder sign the “Affidavit of Support” section of this form.

Available Funds	Amount
Student’s personal funds	\$ _____
Family funds	\$ _____
Other sponsor funds (specify source)	\$ _____
Loan from (specify source)	\$ _____
Scholarship/fellowship from (from source)	\$ _____
Other (specify source)	\$ _____
Total financial support available	\$ _____

I certify that the amounts stated above are correct, and that I have sufficient funds to cover all estimated school and living expenses, including travel to and from the U.S., for the duration of my academic program at Mount Saint Mary's University.

Family Name _____ First Name _____ Middle Name _____ Suffix _____

Signature of Applicant _____ Date _____

Section to Be Completed by Family Sponsor and Other Sponsors

I certify that I will provide the amount of funds stated above to the applicant named above for the purpose of study at Mount Saint Mary's University.

Name of Sponsor _____ Relationship to Applicant _____

Address _____

Signature _____ Date _____ Telephone _____

Section to Be Completed by an Officer of the Relevant Bank or Financial Institution

This is to certify that _____, whose signature appears above, has the amount of available funds stated above on account with our institution. This certificate does not constitute a statement of liability on my part, or on the part of the firm, bank, or institution that I represent.

Name of Officer _____

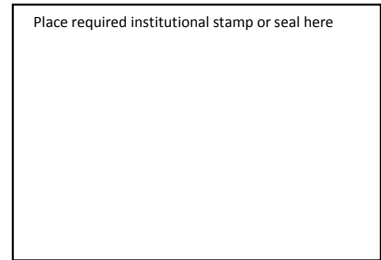
Title _____

Name of Institution _____

Address of Institution _____

Telephone _____

Signature of Officer _____ Date _____



Check here if, instead of completing this section, you are attaching certification on an original sheet of the bank's letterhead stationery, which bears a bank official's signature, the bank's stamp, or the bank's seal.

Estimated Expenses for 1 Year Exchange

Tuition and Fees	43,224 (WAIVED)
Housing and Meals	15,402
Books and Supplies	1,385
Health Insurance	2,780
Total Estimated Expenses	\$19,567

Estimated Expenses for 1 Academic Semester Exchange

Tuition and Fees	21,612 (WAIVED)
Housing and Meals	7,958
Books and Supplies	957
Health Insurance	1,721
Total Estimated Expenses	\$10,636