

ISSS Staff Initials & Date

<input type="checkbox"/> LB	<input type="checkbox"/> CP
<input type="checkbox"/> TM	<input type="checkbox"/> MB
<input type="checkbox"/> MP	

Notes (for official use only)

Enrollment Checked _____

GA Processed ___/___/_____

Approved ___/___/_____

Pickup: Student Initials & Date

DOCUMENT REQUEST FORM

I. General Information

DU Student ID #: _____ 2. Immigration Status: F-1 J-1 Other: _____
Please list type

Family (Last) Name in Passport: _____

Given (First) Name in Passport: _____

Gender: __Male __Female

Date of Birth: ___/___/___
mm dd yy

Phone number: _____

11. DU E-mail address: _____

Note: notification will be sent to DU e-mail address

II. Academic Information

Educational Level:

- Freshman Sophomore Junior Senior Masters Doctorate LLM JD
 Certificate: what type? _____

Primary Major: _____

III. PLEASE INDICATE DOCUMENT(S) NEEDED:

*Refer to the ISSS website: <http://www.du.edu/intl/iss/iss/forms.htm> for instructions and forms.

DOCUMENTS FOR ALL STUDENTS:

- Signature** on I-20 or DS-2019 for travel: Date you plan to **return** to the US (mm/dd/yy): ___/___/___
- *Approval for **Less Than Full-Time Enrollment**
- Certification of **Enrollment**
- *Certification for a **Social Security Number** (must provide job offer letter with nature of employment, hours/week, workplace, and supervisor name & email)
- Letter of **Invitation** (provide name(s), date of birth, relationship, passport numbers of visitors and reason)
- Certification of **Estimated Expenses**
- *Approval for **Concurrent Enrollment**

F-1 STUDENTS:

- ***Curricular Practical Training (CPT)** Authorization
 - ***Optional Practical Training (OPT)** Recommendation
 - Economic Hardship
 - New I-20
- Please remember to complete reverse side of form

J-1 STUDENTS:

- On-campus Work Authorization
 - Academic Training
 - Economic Hardship
 - New DS-2019
- Please remember to complete reverse side of form

If all supporting information is accurate, documents will normally be prepared in 5-7 working days. I understand that I must pick up the documents myself. I hereby authorize the release of any information necessary for this request.

Signature: _____

Date: _____

