WASHINGTON ADVENTIST UNIVERSITY

Initial I-20

Dependent (F-2) Request Form

Please complete the form below if any dependents (spouse or children) will be accompanying you in **F-2 status**. You must provide **proof of identity** and **proof of relationship documents** for each listed dependent (Marriage Certificate, Birth Certificate, etc.) All proof of identify and relationship documents must be in English or have an official English translation. Please complete the below form, attach any supporting documents and send them to internationaladmissions@wau.edu

Along with you **International Student Certificate of Financial Responsibility** you must show **proof of funds** to support each dependent: **$7,500** for spouse/**$4,500** for each dependent child.

Primary F-1 Information:

WAU ID Number: _____

Name: _____
(Name as it appears on your passport or other travel documents: First/Given, Middle [if applicable], and Last)

Dependent # 1 Spouse or Child

Given Name: _____
(Name as it appears on the passport or other travel documents: First/Given, Middle [if applicable], and Last)

Date of Birth: _____ City of Birth: _____ Country of Birth: _____ Country of Citizenship: _____
(mm/dd/yyyy format)

Physical Address Home Country: _____ Same as Primary F-1 _____ Different than Primary F-1 (if marked must list below)

_____

_____
(including any postal codes)

Dependent international phone number: _____ Dependent Personal Email Address_____

Current U.S. Visa Status: **Select One** Status Expiration date: _____
(If applicable)

- None
- F1
- H1B
- H4
- J1 or J2
- A, G, L
- Other status not listed
  Other _____

Dependent # 2 Spouse or Child

Given Name: _____
(Name as it appears on the passport or other travel documents: First/Given, Middle [if applicable], and Last)

Date of Birth: _____ City of Birth: _____ Country of Birth: _____ Country of Citizenship: _____
(mm/dd/yyyy format)

Physical Address Home Country: _____ Same as Primary F-1 _____ Different than Primary F-1 (if marked must list below)

_____

_____

Dependent international phone number: _____ Dependent Personal Email Address_____

Current U.S. Visa Status: **Select One** Status Expiration date: _____

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(If applicable)

- None
- F1
- H1B
- H4
- J1 or J2
- A, G, L
- Other status not listed Other _____

Dependent # 3 Spouse or Child

Given Name: _____
(Name as it appears on the passport or other travel documents: First/Given, Middle [if applicable], and Last)

Date of Birth: _____ City of Birth: _____ Country of Birth: _____ Country of Citizenship: _____
(mm/dd/yyyy format)

Physical Address Home Country: _____ Same as Primary F-1 _____ Different than Primary F-1 (if marked must list below)

_____

_____

Dependent international phone number: _____ Dependent Personal Email Address_____

Current U.S. Visa Status: **Select One** Status Expiration date: _____
(If applicable)

- None
- F1
- H1B
- H4
- J1 or J2
- A, G, L
- Other status not listed
  Other _____

Dependent # 4 Spouse or Child

Given Name: _____
(Name as it appears on the passport or other travel documents: First/Given, Middle [if applicable], and Last)

Date of Birth: _____ City of Birth: _____ Country of Birth: _____ Country of Citizenship: _____
(mm/dd/yyyy format)

Physical Address Home Country: _____ Same as Primary F-1 _____ Different than Primary F-1 (if marked must list below)

_____

_____

Dependent international phone number: _____ Dependent Personal Email Address_____

Current U.S. Visa Status: **Select One** Status Expiration date: _____
(If applicable)

- None (I don't have a U.S. visa)

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- F1
- H1B
- H4
- J1 or J2
- A, G, L
- Other status not listed
  Other _____