International Student Services (ISS) 8099 College Parkway Fort Myers, Florida 33919 Phone: (239) 433-8023

Signature of Applicant:



SEVIS/I-20 INFORMATION

Please note: In order to avoid any delays with the processing of your application, all fields in this form must be fully completed and clearly written. Please submit this form and all other required documents for admission at the same time.

1. Please print your name ex	actly the way it appea	rs on your passport.			
Last Name (Surname)	First Name (Given)			Middle	
tudent ID# (received after submitting the online application)				Gender: 🖵 Male	☐ Female
Country of Birth	Date of Birth (Month/day/year)//			Primary Language	
Country of Citizenship	Email Address			Telephone number _	
2. Permanent Address in the	Home Country:				
Address 1: (Street Name and Number	of Residence)				
City	Province/Territory		Postal Code	Country	
Address 2: (Mailing address for	your admission docun	nents and I-20 form)			
City	Province/Territory		Postal Code	Country	
3. Emergency Contact Inform	ation in the Home Co	untry:			
Last Name (Surname)	Fi	rst Name (Given)	N	/liddle	
Street Name and Number			City	State	
Postal Code	Country Telephone number			Email address	
4. Address in the United Stat	es (if known at time o	f application):			
Street Name and Number					
City	State		ostal Code	Country	
5. Please check the Campus v	vhere you plan to tak	e classes:			
Lee	Collier	Charlotte	Hendry Glad	es Center	
6. Passport, I-94 and SEVIS in	formation (required v	vhen the student report	s to the school)		
Passport number	Pass	port Expiration date		Country issued	
Visa Type	Visa	Expiration date			
I-94 Expiration date	I-94 Admission Number			Port of Entry	
Most Recent Entry Date in U.S.	.S (day stamped on the I-94 card)				