HUMBOLDT STATE UNIVERSITY

Center for International Programs · College of Extended Education and Global Learning

I-20/DS-2019 Update Form

Section A: Student Information

1. Name:				
Family name (Last)		First name (Given)		
2. HSU ID#:	3. Email:			
4. Current US Address:				
☐ This is a new address and my file				
5. Program of study: 🔲 IELI	☐ Undergraduate	☐ Graduate	☐ Non-degree	☐ OPT
6. Reason for request (check one):	☐ Change of m	najor to:		
	☐ Adding seco	ond major of:		
	<u></u>		he US (complete S	
7. Marital status (check one):	\ \ \ \	,	☐ Married, unaccompanied	
	\square Married with family in the US		☐ Number of children:	
Section B: Dependent Infor	mation			
Please list any F-2 or J-2 dependen are required to check in with the Co	•	-		
Spouse Name:				
Family name (Last)			name (Given)	
Date of birth:				☐ Female
Country of birth:		Coun	try of citizenship:	
Child Name:				
Family name (Last)		First r	name (Given)	
Date of birth:		Gend	er: 🗌 Male 🏻 [☐ Female
Country of birth:		Coun	Country of citizenship:	
Child Name:		. <u> </u>		
Family name (Last)			name (Given)	
Date of birth:		Gend	er: 🗌 Male 🏻 [☐ Female
Country of birth:		Coun	try of citizenship:	
For Official Use Only				
☐ I-20 updated ☐ Email student				
Date &	Initials			