

Document Request Form

Last name: _____ First name: _____
Address: _____ City/State/ZIP: _____
Email: _____ Phone: _____
Student ID number: _____ Date requested: _____

Please indicate the type of document you are requesting:

- Signature on my I-20 for travel purposes
Destination: _____ Dates of travel: _____
- A letter verifying legal F-1 student status/full-time enrollment at College of DuPage
- A letter to assist me in obtaining a Temporary Visitor Driver's License
- A letter to assist me in obtaining a Social Security Number
- New I-20 for a change of major to _____
- A letter to assist me in opening a bank account
- A letter to assist me in renting an apartment (for financial verification or reference)
- A replacement I-20 document (for lost or damaged I-20 only)
- A letter to assist an immediate family member to apply for a B-2 visitor visa

Full name: _____

Date of birth: _____

Place of birth: (city and country) _____

Country of citizenship: _____

Relationship to student: _____

Dates/duration of visit: _____

- Additional family members, please use next page and indicate here

Please indicate when you would like to pick up your document:

- Next business day (requests for travel signature only)
- Second business day
- Third business day
- In one week

NOTE: Please allow a reasonable amount of time for us to process your request. We will do our best to prepare your document quickly. Please help us by planning ahead and considering that many other students also need assistance from our staff members.

If you are having trouble submitting this form, save a copy to your computer and attach to an email to: intlstdt@cod.edu

Additional family members

A letter to assist an immediate family member to apply for a B-2 visitor visa

Full name: _____

Date of birth: _____

Place of birth: (city and country) _____

Country of citizenship: _____

Relationship to student: _____

Dates/duration of visit: _____

A letter to assist an immediate family member to apply for a B-2 visitor visa

Full name: _____

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Place of birth: (city and country) _____

Country of citizenship: _____

Relationship to student: _____

Dates/duration of visit: _____

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