



REMOVE DEPENDENT FORM

This form is to be used by continuing MU students to request that a dependent be removed from your I-20 or DS-2019. A new I-20/DS-2019 form will be printed for you. Submit this form with required documents via email to international@millersville.edu or schedule an appointment. Please allow one week for processing.

Form with fields for: First Name, Middle Initial; Last Name; Millersville Email; Date of Birth (mm-dd-yyyy); Gender (Male/Female); Telephone; M Number; Current Address (U.S.); Permanent Address (Outside U.S.)

CHECKLIST OF REQUIRED DOCUMENTS

- Copy of your current I-94
Copy of your current I-20 (pages 1 & 2)
If available, copy documenting your dependent's current immigration status if still in US
Copy of documentation demonstrating the cause for removal. (May include airline boarding pass, status change, divorce certificate, death certificate, etc.)
An unofficial transcript downloaded from MAX

PLEASE COMPLETE FOR EACH DEPENDENT YOU REQUEST BE REMOVED FROM YOUR I-20/DS-2019

Table with 5 columns: Dependent Name (Last, First, Middle), Birthdate (mm/dd/yyyy), Dependent is In OR Out of U.S., Dependent's current US immigration status if in US, Reason for Removal (documentation required)

READ THE STATEMENT BELOW AND SIGN

- I certify I have read the request form instructions and information in full.
I certify the information I have provided is, to the best of my knowledge, true and accurate.
I understand I (and any F-2 or J-2 dependents) must have Millersville University approved health insurance for the duration of my F-1 or J-1 status.
I understand I must report any address changes, current (U.S.) or permanent (out of U.S.), to the office of International Programs and Services as well as through MAX within 10 days of the change.

Signature: _____

Date: _____