

I-20/DS-2019 UPDATE REQUEST FORM

This form is for continuing Millersville Uthis form with the required documents to Registrar's Office to officially record the of a change in your visa status. Please allow one week for processing.	o the Office of International F	Programs and Services (1	IPS). Before submitting this for	orm, you must go to the
First Name, Middle Initial	Last Name		M Number	
Date of Birth (mm-dd-yyyy)	Gender ☐ Male ☐ Female	Telephone	Millersville Email	
Current Address (U.S)				
Permanent Address (outside U.S)				
CHECKLIST OF REQUIRED DO	CUMENTS			
☐ Visit the Registrar's Office to ma ☐ Copy of your current I-20/DS-20 ☐ An unofficial transcript download	ake the change in the Unive 019 (pages 1 & 2)	ersity system. Wait at l	least two days before bringing	ng this form to IPS.
COMPLETE THIS SECTION				
Information Change: Updated information:			e 🗆 Address	□ Major
What date did you go to the Office of	f the Registrar?	//		
Do you need a new I-20/DS-2019 for F-2/J-2 dependents? ☐ Yes ☐ No				
If yes, name of dependent(s) needing	; I-20/DS-2019:			
READ THE STATEMENT BELO	W AND SIGN			
 I certify I have read the requ I certify the information I ha I understand I (and any F-2/my F-1/J-1 status. I understand I must report are change. 	uest form instructions and in ave provided is, to the best (J-2 dependents) must have	of my knowledge, true Millersville Universit	y approved health insurance	
Signature:		Date	e:	