

ADD DEPENDENT FORM

This form is to be used by continuing MU students to request an immigration document to be used for dependents. Dependents are defined by U.S. immigration regulations as "spouse and/or children under 21 years old only." If your spouse/children are U.S. citizens or permanent residents of the U.S., they are not eligible for an immigration document.

Please allow one week for processing.

First Name, Middle Initial	Last Name	Millersville Email	
Date of Birth (mm-dd-yyyy)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Telephone	Student ID Number
Current Address (U.S.) (Full Street Address, City, State, Zip Code)			
Permanent Address (Outside U.S.) (Full Street Address, City, State, Zip Code <i>(if applicable)</i> , Nation)			

CHECKLIST OF REQUIRED DOCUMENTS WHICH MUST ACCOMPANY THIS FORM FOR CONSIDERATION

- ☐ Copy of your current I-94
- ☐ Copy of your current I-20 (pages 1 & 2) or DS-2019
- ☐ Copy of your dependent's passport page showing picture, biographical information, and expiration date
- ☐ An unofficial transcript downloaded from MAX
- ☐ Supporting financial documents

DEPENDENT INFORMATION AS IT APPEARS IN THEIR PASSPORT

Dependent Name (Last, First, Middle)	Relationship to Student (Spouse/Daughter/Son)	Birthdate (mm/dd/yyyy)	City, Country of Birth	Country of Citizenship

READ 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 Warfel Center for International Programs and Services as well as through MAX within 10 days of the change.
- **I understand this must be completed in DocuSign or submitted physically with a wet signature.**

Signature: _____ Date: _____