



Service/Document Request Form

PLEASE COMPLETE THIS FORM AND SUBMIT YOUR REQUEST TO ISS@SMU.EDU. ALL REQUESTS WILL TAKE UP TO FIVE BUSINESS DAYS TO COMPLETE.

BIOGRAPHICAL DATA (To be completed by the student)

Family Name	First/Middle Name
SEVIS ID Number	SMU ID Number
Current U.S. Mailing Address	Home Country Address

Has any of your personal information changed (U.S. address, phone number, etc.)? Yes No
 If so, please update your information in my.smu.edu immediately.

I AM REQUESTING THE FOLLOWING:

<input type="checkbox"/> Reprint of I-20/DS2019	Reason: <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Updated <input type="checkbox"/> Travel
<input type="checkbox"/> Reentry I-20	I am returning after: <input type="checkbox"/> Leave of Absence (absent less than five months) <i>Required Documents: Letter from Academic Advisor</i> <input type="checkbox"/> Authorized Early Withdrawal (absent more than five months) <i>Required Documents: New Financial Documents, Letter from Academic Advisor</i>
<input type="checkbox"/> Copies of Immigration Documents on File	I request copies of:
<input type="checkbox"/> Other	Please Specify:

I WANT TO RECEIVE MY DOCUMENT(S) VIA:

<input type="checkbox"/> Express Mail	Shipping cost must be paid by the student by following the instructions provided on the eShipGlobal/Express Mailing information form.
<input type="checkbox"/> Regular Mail	No cost to the student. Document(s) will be mailed to the address listed under "Current U.S. Mailing Address".
<input type="checkbox"/> In-Person Pick-up	If the person other than the student is picking up this document(s), then they will need bring the FERPA Release Form and a photo ID at the time of pick-up.

By signing below, I affirm that I understand the consequences of my request. If I have any questions, I will contact an ISSS International Services Specialist immediately.

Print Name: _____ Signature: _____ Date: ___ / ___ / ___

International Services Specialist:	Signature	Date
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