

Reprint I-20 or DS-2019 Request

Please use this form if you need your I-20 or DS-2019 immigration document to be reprinted.

IMPORTANT: You DO NOT need to complete this form if you are traveling, changing your major, extending your I-20/DS-2019, or applying for OPT/CPT. If you need to make any of these changes, please complete the appropriate form.

Name:			Student ID: V		
(Family Name)	(First Name)	(Middle Name)			
Mailing Address:					
(Street # and Street Name)	(Apt #)	(City)	(State)	(ZIP Code)	
hone Number: Personal E-mail:					
I need my I-20 or DS-2019	reprinted for the follo	owing reason. My I	-20 or DS-2019	has been:	
□ Damaged	□ Lost □ Stol	en			
☐ I-20 needs an update	e. Please explain the	update:			
Note: If you need a travel si need a new I-20.	gnature, please compl	ete the Travel Signati	ure form and not	e that you	
☐ Other reason. Please	explain:				
Please select how want to	get your new docum	ent.			
☐ I will pick up my docu	ment from the OIED	when it is ready.			
☐ I would like my docur	nent emailed to me.				
☐ I would like my friend		to pick up	my		
document.	(Family/Last Name)	(First Name)			
OIED use only:	Date stamped	Reprinted			