

This form must be completed by the admitting graduate department. This form, along with the “New Graduate Student Request—Student” packet, must be submitted to the International Center (IC) to initiate the student visa document issuance process. **DO NOT** submit pages 1 and 2 of this form. **The processing time for a complete packet is 3 weeks.**

For more information regarding new graduate student processes, please refer to the International Center website:  
<https://www.ic.uci.edu/departments/request-new-visa-doc-new-grad-students.php>

## INSTRUCTIONS

### SECTION A: STUDENT INFORMATION

Provide the student’s personal information in this section. **The student’s name should be entered as it shown on the passport.** Be sure to indicate that the student has: (a) submitted a positive Statement of Intent to Register (SIR), and (b) met the English proficiency requirement. Do not submit the New Graduate Student Request packet if the student has not met these requirements.

### SECTION B: PROGRAM INFORMATION

Indicate the student’s first quarter at UCI and expected quarter of completion. For students in doctoral programs, the expected quarter of completion will be based on the normal time to degree under the UCI Time to Degree Policy for Doctoral Programs chart: <https://www.grad.uci.edu/academics/time-to-degree.php>. The International Center **cannot** issue a visa document indicating summer session as the student’s final quarter.

### SECTION C: FUNDING INFORMATION [IF APPLICABLE]

Complete this section **ONLY** if the student will be receiving funding from UC Irvine.

- F-1 students, indicate funding only for the 2020-2021 year—additional funding is not necessary at this time
- J-1 students, indicate funding for the entire length of program

The department funding the student must complete the “Funding Verification” portion of this section. For more information, please visit the website for the Office of the Registrar: <http://www.reg.uci.edu/navigation/fees.html>.

The amounts listed below are a reflection of the 2019-2020 academic calendar year and are subject to change.

If the student will begin their program during Summer Session, they must be enrolled in a minimum of 6 units and provide the following amount of additional funding: \$9,277 (includes the cost of 6 summer units and living expenses for 3 months). The additional summer session funding does not apply to students in the MFin and MSBA programs.

2020-2021 VISA DOCUMENT FUNDING INFORMATION				
PROGRAM	TUITION/FEES	LIVING EXPENSES	TOTAL FOR ONE ACADEMIC YEAR	
GRADUATE (STANDARD)	\$32,829	\$21,000 REQUIRED FOR 9 MONTH ACADEMIC YEAR (\$7,000 PER QUARTER)	\$53,829	
BIOTECHNOLOGY MGMT	\$42,891		\$63,891	
ENG. MGMT	\$44,556		\$65,556	
GENETIC COUNSEL	\$41,460		\$62,460	
LAW (JD)	\$58,006		\$79,006	
LAW (LLM)	\$63,447		\$84,447	
MBA	\$54,120		\$75,120	
MCS	\$33,381		\$54,381	
MECPS	\$32,250		\$53,250	
MIE	\$55,066		\$76,066	
MS-BATS	\$42,120		\$63,120	
MSWE	\$35,607		\$56,607	
MPAC	\$51,988		\$72,988	
MPH	\$37,137		\$58,137	
MPP	\$37,569		\$58,569	
MURP	\$36,462		\$57,462	
MEng	\$48,200		\$55,200	
MFin	\$61,168		\$28,000	\$89,168
MSBA	\$60,689		\$28,000	\$88,689
ADDT’L PER DEPENDENT	N/A		\$4,500	\$4,500

**SECTION D: AUTHORIZATION**

The admitting academic department is responsible for ensuring that a complete packet is submitted into the International Center. You can reference the Check List below to ensure the student packet is complete.

<b>DEPARTMENT CHECK LIST</b>	
DEPARTMENT FORM	
<input type="checkbox"/>	<b>STUDENT INFORMATION</b>
<input type="checkbox"/>	<b>PROGRAM INFORMATION</b>
<input type="checkbox"/>	<b>FUNDING INFORMATION</b> <i>[IF APPLICABLE]</i>
<input type="checkbox"/>	<b>AUTHORIZATION</b>
STUDENT PACKET	
<input type="checkbox"/>	<b>VISA INFORMATION</b>
<input type="checkbox"/>	<b>PERSONAL INFORMATION</b>
<input type="checkbox"/>	<input type="checkbox"/> COPY OF PASSPORT BIOGRAPHICAL PAGE
<input type="checkbox"/>	<b>ADDRESS INFORMATION</b>
<input type="checkbox"/>	<b>FUNDING INFORMATION</b>
<input type="checkbox"/>	<input type="checkbox"/> REQUIRED FINANCIAL DOCUMENTS
<input type="checkbox"/>	<b>MAILING INFORMATION</b>
<input type="checkbox"/>	<input type="checkbox"/> PAY FOR UEMS/ESHIPGLOBAL
<input type="checkbox"/>	<b>SIGNATURE</b>
<input type="checkbox"/>	<b>DEPENDENT INFORMATION</b> <i>[IF APPLICABLE]</i>
<input type="checkbox"/>	<input type="checkbox"/> ADDITIONAL FUNDING DOCUMENTS
<input type="checkbox"/>	<input type="checkbox"/> COPY OF DEPENDENT(S) PASSPORT BIOGRAPHICAL PAGE
<input type="checkbox"/>	<b>SEVIS RECORD TRANSFER PROCESS</b> <i>[IF APPLICABLE]</i>

**SECTION A: STUDENT INFORMATION**

STUDENT INFORMATION	
LAST NAME:	FIRST NAME:
UCINetID:	UCI STUDENT ID #:
STUDENT HAS MET THE FOLLOWING REQUIREMENTS:	
<input type="checkbox"/> YES, STUDENT HAS MET THE ENGLISH PROFICIENCY REQUIREMENT FOR ADMISSION TO UCI <input type="checkbox"/> YES, STUDENT HAS SUBMITTED A POSITIVE STATEMENT OF INTENT TO REGISTER (SIR)	

**SECTION B: PROGRAM INFORMATION**

PROGRAM INFORMATION		
PROGRAM START DATE:		
<input type="checkbox"/> FALL [9/28/2020]	<input type="checkbox"/> MBA PROGRAM [9/2/2020]	<input type="checkbox"/> OTHER: _____
<input type="checkbox"/> SUMMER I [6/22/2020]	<input type="checkbox"/> SUMMER 10-WEEK [6/21/2020]	<input type="checkbox"/> SUMMER II [8/3/2020]
<input type="checkbox"/> LAW SCHOOL – JD [8/11/2020]	<input type="checkbox"/> LAW SCHOOL – LLM [8/10/2020]	
*STUDENT MUST BE ENROLLED FULL-TIME (6 UNITS) TO BEGIN PROGRAM DURING A SUMMER SESSION		
PROGRAM END DATE:		
<input type="checkbox"/> FALL, YEAR: _____	<input type="checkbox"/> WINTER, YEAR: _____	<input type="checkbox"/> SPRING, YEAR: _____
<input type="checkbox"/> LAW FALL, YEAR: _____	<input type="checkbox"/> LAW SPRING, YEAR: _____	<input type="checkbox"/> OTHER, YEAR: _____
MAJOR:		
EDUCATION LEVEL STUDENT WILL BE PURSUING AT UCI:		
<input type="checkbox"/> MASTERS	<input type="checkbox"/> DOCTORATE	<input type="checkbox"/> EAP/RECIPROCITY STUDENT

**SECTION C: FUNDING INFORMATION [IF APPLICABLE]**

FUNDING VERIFICATION	
FUNDING AMOUNT [\$]:	DEPARTMENT:
NAME OF DEPT. CONTACT:	TITLE:
TELEPHONE:	EMAIL:
SIGNATURE:	TODAY'S DATE [MM/DD/YYYY]:

**SECTION D: AUTHORIZATION**

DEPARTMENT AUTHORIZATION	
I verify that this student has been admitted to the University of California, Irvine. I understand that the academic department is responsible for notifying the International Center of any changes to the above named student's academic plans, such as: withdrawal, deferring enrollment, change of program, change of funding, cancellation, etc.	
PRINT NAME:	TITLE:
DEPARTMENT:	TELEPHONE:
EMAIL:	ZOT CODE:
SIGNATURE:	TODAY'S DATE: