



Student Information Form

PLEASE PRINT CLEARLY

Name: _____ (Last) (First) (Middle)			
Bronco ID#:		Country of Citizenship:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Birthdate (month/day/year):	
Phone #:		E-mail:	
Local U. S. Home Address	_____ (Street) (Apt. #)		
	_____ (City) (State) (Zip)		
	_____ (Street)		
Overseas Home Address Must be written in English (Required by USCIS)	_____ (City) (Province) (Country) (Zip Code)		

EMERGENCY CONTACT INFORMATION

Overseas Contact	Name: _____ Phone#: _____		
	The person speaks English: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, what language is spoken: _____		
	Relationship: _____ Email: _____		

U. S. Contact	Name: _____ Phone#: _____		
	Address: _____ (Street) (Apt #)		
	The person speaks English: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, what language is spoken: _____		
	Relationship: _____ Email: _____		

CHANGE OF ADDRESS

Date _____	_____		
Phone #: ()	_____ (Street) (Apt. #)		
	_____ (City) (State) (Zip)		

Date _____	_____		
Phone #: ()	_____ (Street) (Apt. #)		
	_____ (City) (State) (Zip)		

FOR OFFICE USE ONLY:

I-94 Card	Passport	Visa Stamp	Online Form	Past I-20s	CPP I-20
FILE COMPLETE					

NOTES:
