



International Center

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DEPENDENT REQUEST

Purpose

This form has two purposes. You can use this form if your spouse or children will be joining you in the United States as your dependent(s). You can also use this form to delete dependent(s) from your record.

F-1 Student Information

Last Name _____ First Name _____

Date of Birth _____ Phone Number _____

SEVIS ID # _____ UM ID # _____

Action

- Add dependent**

F-1 must provide proof of:

- Financial Support: Spouse \$3,000 and/or Child \$3,000
- Marriage certificate or birth certificate

- Delete dependent**

- Change in existing dependent information**

Legal Name Change from _____ to _____

- Provide copy of new passport

- Other** _____

Dependent Information

Family name (surname) _____ First name (given) _____

Date of birth _____ Gender ___Female ___Male

Country of birth _____ City of birth _____

Country of citizenship _____ Country of Permanent Residence _____

Relationship ___Spouse ___Child

Family name (surname) _____ First name (given) _____

Date of birth _____ Gender ___Female ___Male

Country of birth _____ City of birth _____

Country of citizenship _____ Country of Permanent Residence _____

Relationship ___Spouse ___Child

Family name (surname) _____ First name (given) _____

Date of birth _____ Gender Female Male

Country of birth _____ City of birth _____

Country of citizenship _____ Country of Permanent Residence _____

Relationship Spouse Child

Family name (surname) _____ First name (given) _____

Date of birth _____ Gender Female Male

Country of birth _____ City of birth _____

Country of citizenship _____ Country of Permanent Residence _____

Relationship Spouse Child

Family name (surname) _____ First name (given) _____

Date of birth _____ Gender Female Male

Country of birth _____ City of birth _____

Country of citizenship _____ Country of Permanent Residence _____

Relationship Spouse Child
