



Dependents accompanying or following to join an F-1 Student, J-1 Student, or a J-1 Exchange Visitor (EV) require their own Form I-20 or Form DS-2019 to apply for a visa and to be admitted to the U.S. in F-2 or J-2 status. Dependents, for the purpose of visa sponsorship, consist of a spouse and minor children (unmarried and under the age of 21). Dependents who come for short visits only may want to consider a tourist visa (B-2) to visit the U.S.

SECTION I: Student or Exchange Visitor Information			
Family Name (as in passport):		Given Name (as in passport)	
Expected date studies or research/teaching will end:			
Current Immigration Status:	F-1 Student	J-1 Student	J-1 Scholar (Researcher, Professor, Short-Term)
SECTION II: Family Information			
Please answer the questions below, then provide all of the required information on page 2 about each dependent for which you would like a Form I-20 or DS-2019			
Are your dependents currently in the U.S.?	Yes	No	
Will your family travel with you to the U.S.?	Yes	No	
Will your family travel to the U.S. separately?	Yes	No	
How long will your dependents stay in the U.S.?	For the entirety of my stay.		Other_____

Copies of Passports and Proof of Relationship Required: You must include a copy of each dependent’s passport identification page. If they are in the U.S., also include a copy of the [Form I-94 record](#) and relevant immigration forms. Additionally, you must provide proof of relationship, translated into English (example: marriage or birth certificate).

Financial Support: You must demonstrate sufficient financial support for the expense of your dependents. You must provide original documents demonstrating that your family will have adequate funds for their expenses in the U.S.

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| Financial Support (F-1 and J-1 Students) for Academic Year: | Minimum financial (J-1 Scholars) support per month in US dollars: |
| - Spouse: \$4,500 | - Spouse: \$500 |
| - Child (each): \$3,600 | - Child (each): \$400 |

Medical Insurance for J-1 Exchange Visitors: Dependents in J-2 status will be required to have, and present evidence of health insurance coverage for the duration of the EV’s program participation required by the U.S. Department of State. This is true even if the J-2 will be making short, occasional visits to the U.S. in J-2 status.

Signature: _____ Date: _____

Continue to page 2 for Dependent Information.

Dependent 1:

Family Name (as in Passport)	Given Name (as in Passport)
Gender (Male/Female/Other)	Date of Birth (month/day/year)
City of Birth:	Country of Birth:
Country of Citizenship:	Country of Legal Permanent Residence:
Relationship: Spouse	Child (under the age of 21)

Dependent 2:

Family Name (as in Passport)	Given Name (as in Passport)
Gender (Male/Female/Other)	Date of Birth (month/day/year)
City of Birth:	Country of Birth:
Country of Citizenship:	Country of Legal Permanent Residence:
Relationship: Spouse	Child (under the age of 21)

Dependent 3:

Family Name (as in Passport)	Given Name (as in Passport)
Gender (Male/Female/Other)	Date of Birth (month/day/year)
City of Birth:	Country of Birth:
Country of Citizenship:	Country of Legal Permanent Residence:
Relationship: Spouse	Child (under the age of 21)

Dependent 4:

Family Name (as in Passport)	Given Name (as in Passport)
Gender (Male/Female/Other)	Date of Birth (month/day/year)
City of Birth:	Country of Birth:
Country of Citizenship:	Country of Legal Permanent Residence:
Relationship: Spouse	Child (under the age of 21)