

105 B.B. Comer Hall | Box 870254 | Tuscaloosa, AL 35487-0254 | TEL: 205-348-5402 | INTERNATIONAL@UA.EDU | HTTP://INTERNATIONAL.UA.EDU/ISSS/

I-20/ DS-2019 Reprint Form

SECTION 1: STUDENT'S INFORMATION		
Today's Date:	UA CWID:	
Full Name:		
Family/Last Name (Surname)	Given Name (First)	Middle Name (if any)
Current U.S. Address:		
Phone Number:	UA E-Mail Address:	@crimson.ua.edu
CECTION A DIE	ACE CHECK BEACONION FOR NI	EW I 20 /DC 2040
	ASE CHECK REASON(S) FOR NE	5W 1-20/DS-2019
REPLACE MY I-20/DS-2019		
REPLACE MY SPOUSE/CHILD'S I-20	D/DS-2019: (spouse/child's name) _	
(SELECT REASON)		
LOST		
□STOLEN		
□DAMAGED		
Was the passport or any other document also lost, stolen, or damaged? Yes No		
If yes, have you reported this to any officials	yet? LYes LNo	
☐ CHANGE MAJOR/CONCENTRATIO	N	
Have you submitted your change of major/concentration with your academic advisor/department? Yes No		
PRIOR MAJOR/CONCENTRATION:		
NEW MAJOR/CONCENTRATION:		
☐ CHANGE OF FINANCIAL INFORMA	TION	
Please attach updated financial documentati requirements required for issuance of an ini include a copy of any letters of award or sp certification in English not more than 12 rhttp://international.ua.edu/isss/future-new-	tial I-20. If funds are from an organiz onsorship. If your support is from pe nonths old. Financial information m	eation, grant, or government support, please ersonal or parent funds, please include bank
☐ NAME CHANGE		
Please attach copy of passport or government document which shows new name or correct name spelling. For students who are changing their legal name, the name change process usually begins by obtaining a new passport first and then an updated I-20, Social Security Number, etc.		