



## SYRACUSE UNIVERSITY

LILLIAN AND EMANUEL SLUTZKER CENTER FOR INTERNATIONAL SERVICES

310 Walnut Place | Syracuse, New York 13244-2380

TEL: 315-443-2457 | FAX: 315-443-3091 | EMAIL: [LESCIS@SYR.EDU](mailto:LESCIS@SYR.EDU)

<http://international.syr.edu/>

**DS-2019  
Request**

### Requesting a new DS-2019 form

Use this Request Form to obtain a new DS-2019 for the following reasons:

- Replace a lost DS-2019 form
- Update financial information (change in source of funding, applying for a new visa, etc.)
- Change your immigration status to J-1

Do not use this form for the following reasons:

- If you are interested in adding a program or changing your level of study, please make an appointment to see a Slutzker Center advisor. J-1 students are generally not allowed to change their program of study, but may be eligible to change the level of study.
- If you want to add your dependent(s) to your SEVIS record and receive DS-2019 forms for them, please file a Dependent Request Form.
- If you need to apply for an extension of your program (item 3 on your DS-2019), please file a DS-2019 Extension request.

### Procedures for requesting a new DS-2019

1. Complete the DS-2019 Request Form
2. Complete the Financial Worksheet
3. Submit the following documents to the Slutzker Center:
  - DS-2019 Request Form
  - Financial Worksheet
  - Photocopies of your passport identity and validity page(s), visa, I-94, and DS-2019 forms
  - Proof of health insurance coverage (coverage must meet the federal mandatory minimums set by the Department of State and must include Medical Evacuation and Repatriation)
  - Proof of financial support (see documents listed on Financial Worksheet)

A Slutzker Center advisor will contact you if there are questions regarding your request and upon issuance of your new DS-2019 form.



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**DS-2019  
Request Form**

### PERSONAL INFORMATION

Student Name \_\_\_\_\_ SUID# \_\_\_\_\_

SEVIS# N \_\_\_\_\_ Current I-20 Program End Date: \_\_\_/\_\_\_/\_\_\_

Program of Study \_\_\_\_\_ Degree Level:  UG  Master's  PhD  Other

Local Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Upcoming travel plans?  Yes  No If yes, Destination: \_\_\_\_\_ Dates: \_\_\_\_\_

### REASON FOR REQUEST

You may have more than one request. Check (✓) the boxes that apply to your situation.

Replace Lost Document

Update Financial Amount

Change Immigration Status from \_\_\_\_\_ to \_\_\_\_\_

(Meet with a Slutzker Center Advisor)

Other, please explain \_\_\_\_\_

I certify that the above information is accurate:

Student Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_



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## Financial Worksheet

SUID: \_\_\_\_\_

SEVIS ID: \_\_\_\_\_

Today's Date: \_\_\_/\_\_\_/\_\_\_

Student Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Preferred Email Address: \_\_\_\_\_

**You must provide proof of sufficient financial support to cover your tuition, fees, living expenses and if applicable, the expenses of your dependents.**

**Based on the estimated expenses below, my expenses for the next academic year will be:**

Tuition: \_\_\_\_\_

Living Expenses: \_\_\_\_\_

Dependent Expenses: \_\_\_\_\_

**I will pay for my tuition, fees, living expenses and the expenses of my dependents (if any) with:**

- Personal Funds
- Family Funds
- Funds from Syracuse University
- Funds from another source (specify) \_\_\_\_\_

**I am submitting the following documents as proof of financial support for my expenses:**

- Bank Statements (Less than 6 months old)
- Support letters from my financial sponsor and proof of their ability to provide funding
- Scholarship and/or assistantship award letters

### Estimated Expenses for the 2017 - 2018 academic year

	Undergraduate Students	Graduate Students	Law School Students
<b>Tuition &amp; Fees</b>	\$49,427 per year	\$36,802 per year (\$1,500/credit hour) Fees vary for individual programs	\$48,552 per year
<b>Living Expenses</b>	\$19,557 per year	\$15,076 per year	\$20,258 per year
<b>Total</b>	\$68,984 per year	\$51,878 plus fees per year	\$68,810 per year

### Dependents

Dependents	No SU Assistantship	SU Assistantship
Spouse or child only	\$9,620	\$8,939
Spouse and 1 child	\$15,545	\$15,930
Spouse and 2 children	\$21,470	\$19,625
Spouse and 3 children	\$25,165	\$22,669