University of Virginia INTERNATIONAL STUDIES OFFICE <u>DS-2019 Request Document</u>

Reason for Requesting DS-2019:

□ Lost DS-2019 □ Change of Program	□ Change of Degree
Program Extension Change of Funding	□ Use by Dependents
□ SEVIS request	
Date:	
Family Name	
First Name	
Country of Citizenship	
Charlottesville Address	
Zip code	
Permanent (Foreign) Address:	
Email Address	
What is your department of study	
Undergrads: Do you have a Major?	
Minor?	
What degree do you expect to receive at UVa.	?

FAMILY

Spouse - Name, Dat	e and Place of Birth:		
Children - Name, D	ate and Place of Birth:		
	tesville now:		
INSURANCE: Eme Name of Insurance	rgency hospitalization ins Company	surance is mandatory.	
Policy Number			
		oposed dates of employment:	
From	То	Full-Time/Part-Time	
Previous Employmen	t Authorization while on J-1	status: write in dates	
	during or after I	during or after Bachelors/Masters/Doctorate	
Funding at UVA			
Amount:	Source:		
Additional SEVI	S Data		
SSN or ITIN#:			
Driver's License #:			
IMPORTAN	T: By Law, Changes	of Address and Status must be	

reported to the ISO within 10 days. You may email changes to <u>issp@virginia.edu</u> or bring changes in writing to the ISO.