

Application Form for J-1 Students

Program No. P-1-0322

University of Southern California
Office of International Services

() Mr. () Ms. _____
Family (last) name Given (first) name Other

First semester at USC: _____ Today's Date: _____
Semester Year Month Day Year

Student ID#: _____ Social Security Number: _____

Local Address: _____
Number and Street Apt. # City Zip Code

Telephone Number (_____) _____ Please check if this is a new address or telephone number

E-mail Address: _____ Date of Birth: _____
Month Day Year

Country of Birth: _____ Country of Citizenship: _____

Major Field of Study: _____ Degree Objective: _____

Expected Graduation Date: _____ Date Authorized Stay Expires: _____
(Completion date on IAP-66[#3])

PURPOSE OF THIS FORM (Check one):

- Request for Extension of Stay From ____/____/____/ To ____/____/____/ (**Attach Verification of Graduation Date form and proof of financial support**)
- Visiting _____ From ____/____/____/ To ____/____/____/ (**Attach pink copy of IAP-66**)
(Statement on back of pink IAP-66 must be signed by you)
- Request for New IAP-66 for Spouse/Children. (**Proof of financial support required**)
___ Spouse and/or Children travelling separately. ___ New Entry for Spouse/Children to the U.S.

*Please provide the information requested below for your dependents.

Name	Country of Birth	Date of Birth	Country and Passport #	Expiration Date	Relationship
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- Request for On-Campus Employment Authorization
- Request for Off-Campus Employment Based on Economic Necessity (Letter and Documentation Required)
- Transferring From: _____
- Request Change of Category

SOURCE OF FUNDING (please complete)

- Personal funds \$ _____
- Funds from USC (type: _____) \$ _____
- Funds from another source (type: _____) \$ _____

For office use only:

_____ units for _____. Restrictions: _____. LTMU needed for _____.

FORM OIS.41

Revised 7/28/1999