



STUDENT DATA FORM

Course Code

SEVIS # (f-1 students only)

* I-94# (F-1 students only)

Personal Information

Student's Name

Last (family/surname) name

First name

Middle name

Date of Birth

 / /

Month

Day

Year

Gender

Female

Male

Your e-mail address

Student's Local Street Address

House/Apt. Number and Street

City

State / Province

Country

Postal / Zip Code

Local Phone Number:

Country Code

City Code

Telephone Number

Name/Phone Number of person to be notified in case of emergency (someone local if possible)

Name

Cell Phone

Home Country Address

House/Apt. Number and Street

City

State / Province

Postal / Zip Code

Country

Country of Citizenship

Place of Birth

I have been vaccinated for meningitis: Yes No **Date of vaccination:**

My Health Insurance is from **Policy #**
 (Company name)

*How to retrieve your I-94 number: Go to the U.S. Customs and Border Patrol (CBP) website, at www.cbp.gov/194 in order to obtain your I-94 number.

Email this form and required documents to: gparthiban@utep.edu or Fax it to: (915) 747-5538