



Request to Replace I-20 Form
International Student and Scholar Services

300 College Park, Rike Center #204
Dayton, OH 45469-1701
Ph: (937) 229-2748 • Fax: (937) 229-2766

This form is to be used to request a replacement I-20.

TO BE COMPLETED BY STUDENT

Family Name _____ First Name _____

Student ID _____ SEVIS ID: N00 _____

U.S. Address _____
Street name and number City State Zip Code Phone

Reprint Reason (required):

- Lost
- Stolen
- Damaged
- Other _____

Office Use Only			
ISSM		Date	