

GLOBAL SERVICES DATA/CHECK IN FORM

Campus location:

New Brunswick / Piscataway Newark Scotch Plains

Immigration status: F-1 H-1 J-1 O-1 **Gender:** M **Marital Status:** Single

F

Married

Date of birth

Divorced

Family Name First Name Middle Name

Rutgers ID# Personal E-mail address:

SEVIS ID# RBHS E-mail address:

Local US Address

Street name and number: Apt. number

City State Zip Code

Home/Cell Phone Number Work Phone Number

Permanent Address Abroad (please enter complete address)

Address: Country

 Phone # Abroad

City of Birth Country of birth Country of Citizenship

Country of legal Permanent Residence

I-94 Card # Date of last entry into the U.S. Port of entry

Person to Contact in an emergency (in the U.S. if possible):

Name: Phone:

E-mail Address

Relationship of this person to you (e.g., friend, uncle, etc.):

Complete this section for dependents

INSTRUCTIONS: Please include copies of your dependent's passport, visa, I-94 card and DS-2019 or I-20.

Dependent #1

Relationship: Spouse Child Visa Status: F-2 J-2 H-4 Other

Family name First name Middle name

Dependent #2

Relationship: Spouse Child Visa Status: F-2 J-2 H-4 Other

Family name First name Middle name

Dependent #3

Relationship: Spouse Child Visa Status: F-2 J-2 H-4 Other

Family name First name Middle name

Dependent #4

Relationship: Spouse Child Visa Status: F-2 J-2 H-4 Other

Family name First name Middle name

Dependent #5

Relationship: Spouse Child Visa Status: F-2 J-2 H-4 Other

Family name First name Middle name

For Students only:

School: GSBS SDM
 SHP SON
 SOM SPH

Department/Program:

Degree sought:

Expected Completion Date:

For Faculty/Staff only:

Job Title:

Supervisor:

Dept. Administrator

Location of Employment:

Street Address

City/State/Zip

Telephone #