

13-15

SEVIS ID: N0028812070

SURNAME/PRIMARY NAME G.Rashmitha	GIVEN NAME	Class of Admission <b>F-1</b> ACADEMIC AND LANGUAGE
PREFERRED NAME G.Rashmitha	PASSPORT NAME G.Rashmitha	
COUNTRY OF BIRTH India	COUNTRY OF CITIZENSHIP India	
DATE OF BIRTH 22-Sep-1995	ADMISSION NUMBER	
FORM ISSUE REASON	LEGACY NAME	

<b>SCHOOL INFORMATION</b>	
SCHOOL NAME The University of Texas at Arlington The University of Texas at Arlington	SCHOOL ADDRESS c/o Office of International Education, UTA Box 19028, 1022 UTA Blvd, Arlington, TX 76019
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Arrin Hines Admission Counselor 1	SCHOOL CODE AND APPROVAL DATE DAL214F0080000 21 JANUARY 2003

<b>PROGRAM OF STUDY</b>		
EDUCATION LEVEL MASTER'S	MAJOR 1 Computer and Information Sciences, General 11.0101	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 23 JULY 2018
START OF CLASSES 22 AUGUST 2018	PROGRAM START/END DATE 22 AUGUST 2018 - 31 DECEMBER 2020	

<b>FINANCIALS</b>	
ESTIMATED AVERAGE COSTS FOR: 9 MONTHS	STUDENT'S FUNDING FOR: 9 MONTHS
Tuition and Fees \$ 15,148	Personal Funds \$ 0
Living Expenses \$ 15,033	Funds From This School \$
Expenses of Dependents (0) \$ 0	Family Funds \$ 34,181
Other \$	On-Campus Employment \$
TOTAL \$ 34,181	TOTAL \$ 34,181

**REMARKS**  
Student must attend on-campus orientation prior to registration. Students may only enter the U.S. up to 30-days prior to the program start date listed above.

**SCHOOL ATTESTATION**  
I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X *Arrin Hines* DATE ISSUED 03 March 2018 PLACE ISSUED Arlington, TX

SIGNATURE OF: Arrin Hines, Admission Counselor 1

**STUDENT ATTESTATION**  
I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.2(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

X

SIGNATURE OF: G.Rashmitha DATE

X

NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE
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