

Department of Homeland Security

U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status OMB NO. 1653-0038

SEVIS ID: N0032472839

SURNAME/PRIMARY NAME

PREFERRED NAME

Teja Sree Goli

COUNTRY OF BIRTH

CITY OF BIRTH

Miryalaguda

FORM ISSUE REASON INITIAL ATTENDANCE GIVEN NAME

Teja Sree

PASSPORT NAME

COUNTRY OF CITIZENSHIP

DATE OF BIRTH

25 APRIL 1999

ADMISSION NUMBER

Class of Admission

ACADEMIC AND LANGUAGE

SCHOOL INFORMATION

SCHOOL NAME

San Jose State University
San Jose State University

SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL

Graduate Program Evaluator

SCHOOL ADDRESS

One Washington Square, International Student and

Scholar Services, San Jose, CA 95192

SCHOOL CODE AND APPROVAL DATE

31 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL

MAJOR 1 MASTER'S

Computer Engineering, General 14.0901

MAJOR 2 None 00.0000

PROGRAM ENGLISH PROFICIENCY

Required

ENGLISH PROFICIENCY NOTES

Student is proficient

EARLIEST ADMISSION DATE

START OF CLASSES

26 JANUARY 2022

PROGRAM START/END DATE

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONT	HS	STUDENT'S FUNDING FOR: 9 MONTHS		
Tuition and Fees	\$ 16,906	Personal Funds	\$ 42,000	
Living Expenses	\$ 22,879	Funds From This School	Ş	
Expenses of Dependents (0)	\$	Funds From Another Source	\$	
Medical Insurance	\$ 2,180	On-Campus Employment	ş	
TOTAL	\$ 41,965	TOTAL	\$ 42,000	

REMARKS

SCHO	OL A	TT	EST/	T	ON

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 senool official of the above named school and am authorized to issue this form

SGNALURE OF Andrew Le, Graduate Program Evaluator

DATE ISSUED

PLACE ISSUED

San Jose, CA

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 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

SIGNATURE OF: Teja Sree Goli

DATE

NAME OF PARENT OR GUARDIAN

SIGNATURE

ADDRESS (city/state or province/country)

DATE

PRINCIPAL

G. Narayanamma Institute of Technology & Science (for women) (AUTONOMOUS)

Shaikpet, Hyderabad - 500 104

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