

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: N0032487178

SURNAME/PRIMARY NAME

Boggarapu

PREFERRED NAME

Shethala Boggarapu

COUNTRY OF BIRTH

INDIA

CITY OF BIRTH

Hyderabad, Telangana

FORM ISSUE REASON

INITIAL ATTENDANCE

GIVEN NAME

Shethala

PASSPORT NAME

Boggarapu Shethala

COUNTRY OF CITIZENSHIP

INDIA

DATE OF BIRTH

22 FEBRUARY 2000

ADMISSION NUMBER

Class of Admission

ACADEMIC AND LANGUAGE

SCHOOL INFORMATION

SCHOOL NAME

PACE UNIVERSITY

PACE UNIVERSITY-NEW YORK CITY

SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL

Bayu Sutrisno

Graduate Admission Counselor

PROGRAM ENGLISH PROFICIENCY

SCHOOL ADDRESS

INTERNATIONAL STUDENTS & SCHOLARS OFFICE, ONE PACE

PLAZA, SUITE W-207, NEW YORK, NY 10038

SCHOOL CODE AND APPROVAL DATE

NYC214F00449000

29 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL

Information Science/Studies 11.0401

MAJOR 1

ENGLISH PROFICIENCY NOTES

Student is proficient

MAJOR 2

None 00.0000

EARLIEST ADMISSION DATE 25 DECEMBER 2021

START OF CLASSES

24 JANUARY 2022

PROGRAM START/END DATE

24 JANUARY 2022 - 31 MAY 2024

FINANCIALS

Required

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 25,830	Personal Funds	\$ 0
Living Expenses	\$ 23,000	Funds From This School	\$ 0
Expenses of Dependents (0)	\$ 0	Sponsor	\$ 53,110
Health insurance, books, personal expe	\$ 4,280	On-Campus Employment	\$ 0
TOTAL	\$ 53,110	TOTAL	\$ 53,110

REMARKS

Mandatory virtual check-in with International Students & Scholars on Tuesday, January 11, 2022. Electronic signature due to COVID19.

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.

Bayu Sutrisno

DATE ISSUED

PLACE ISSUED

SIGNATURE OF: Bayu Sutrisno, Graduate Admission

08 November 2021

NEW YORK, NY

Counselor

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: Shethala Boggarapu

NAME OF PARENT OR GUARDIAN

SIGNATURE

DATE

ADDRESS (city/state or province/country)

DATE

PRINCIPAL

G. Narayanarnma Institute of Technology & Science (for woman)

(AUTONOMOUS) Shaikpet, Hyderabad - 500 104.

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