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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: N0033308481

SURNAME/PRIMARY NAME Kurapati PREFERRED NAME Namratha Kurapati COUNTRY OF BIRTH INDIA CITY OF BIRTH Khammam FORM ISSUE REASON INITIAL ATTENDANCE	GIVEN NAME Namratha	Class of Admission <h1>F-1</h1> ACADEMIC AND LANGUAGE
	PASSPORT NAME	
	COUNTRY OF CITIZENSHIP INDIA	
	DATE OF BIRTH 20 JULY 1999	
	ADMISSION NUMBER	

SCHOOL INFORMATION SCHOOL NAME San Jose State University San Jose State University SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Cristina Velarde Evaluation Specialist, GAPE	SCHOOL ADDRESS One Washington Square, International Student and Scholar Services, San Jose, CA 95192 SCHOOL CODE AND APPROVAL DATE SFR214F00627000 31 JANUARY 2003
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PROGRAM OF STUDY	
EDUCATION LEVEL MASTER'S	MAJOR 1 Computer Software Engineering 14.0903
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient
START OF CLASSES 19 AUGUST 2022	PROGRAM START/END DATE 12 AUGUST 2022 - 20 MAY 2025
	MAJOR 2 None 00.0000
	EARLIEST ADMISSION DATE 13 JULY 2022

FINANCIALS		STUDENT'S FUNDING FOR: 9 MONTHS	
ESTIMATED AVERAGE COSTS FOR: 9 MONTHS			
Tuition and Fees	\$ 15,300	Personal Funds	\$ 0
Living Expenses	\$ 23,565	Funds From This School	\$
Expenses of Dependents (0)	\$	Family Funding	\$ 41,045
Medical Insurance	\$ 2,180	On-Campus Employment	\$
TOTAL	\$ 41,045	TOTAL	\$ 41,045

REMARKS

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.

SIGNATURE OF: Cristina Velarde **DATE ISSUED:** 10 June 2022 **PLACE ISSUED:** San Jose, CA
9088386C99F34CD... GAPE

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: Namratha Kurapati **DATE:** _____
 SIGNATURE OF: _____ **DATE:** _____
NAME OF PARENT OR GUARDIAN **SIGNATURE** **ADDRESS (city/state or province/country)** **DATE**

PRINCIPAL
 G. Narayanamma Institute of
 Technology & Science (for woman)
 (AUTONOMOUS)
 Shaikpet, Hyderabad - 500 104