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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: N0033092943

SURNAME/PRIMARY NAME
Civaripally

PREFERRED NAME
Sharon Blessy Civaripally

COUNTRY OF BIRTH
INDIA

CITY OF BIRTH
Hyderabad

FORM ISSUE REASON
CONTINUED ATTENDANCE

GIVEN NAME
Sharon Blessy
PASSPORT NAME
Civaripally Sharon Blessy
COUNTRY OF CITIZENSHIP
INDIA
DATE OF BIRTH
07 FEBRUARY 2000
ADMISSION NUMBER
053912513A3

Class of Admission

F-1

ACADEMIC AND
LANGUAGE

SCHOOL INFORMATION

SCHOOL NAME
New York Institute of Technology
NYIT - Manhattan Campus

SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL
Christopher Olagunju
Assistant Director of International Education

SCHOOL ADDRESS
1855 Broadway, New York, NY 10023

SCHOOL CODE AND APPROVAL DATE
NYC214F00736001
29 JANUARY 2003

PROGRAM OF STUDY

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
08 AUGUST 2022

START OF CLASSES
07 SEPTEMBER 2022

PROGRAM START/END DATE
07 SEPTEMBER 2022 - 07 SEPTEMBER 2024

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS	
Tuition and Fees	\$ 25,200
Living Expenses	\$ 14,050
Expenses of Dependents (0)	\$ 0
Health Insurance	\$ 2,750
TOTAL	\$ 42,000

STUDENT'S FUNDING FOR: 9 MONTHS

Personal Funds	\$ 0
Funds From This School	\$ 57,000
Parent	\$
On-Campus Employment	\$ 57,000
TOTAL	\$ 57,000

REMARKS

Student ID# 1318510 Student program of study is MS Computer Science

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 *Christopher Olagunju*
SIGNATURE OF Christopher Olagunju, Assistant Director
of International Education

DATE ISSUED
28 September 2022

PLACE ISSUED
New York, NY

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.

X
SIGNATURE OF Sharon Blessy Civaripally

DATE

NAME OF PARENT OR GUARDIAN

X
SIGNATURE

ADDRESS (city/state or province/country)

DATE