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SEVIS ID: N0033600232

SURNAME/PRIMARY NAME Suroju	GIVEN NAME Uma Maheshwari	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Uma Maheshwari Suroju	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH Hyderabad	DATE OF BIRTH 16 MARCH 2001	
FORM ISSUE REASON INITIAL ATTENDANCE - UPDATED	ADMISSION NUMBER	

SCHOOL INFORMATION

SCHOOL NAME UNIVERSITY OF CENTRAL MISSOURI Missouri Innovation Campus	SCHOOL ADDRESS 1101 Innovation Parkway, LEES SUMMIT, MO 64086
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Rebecca Leevey International Student Advisor	SCHOOL CODE AND APPROVAL DATE KAN214F00100001 17 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL MASTER'S	MAJOR 1 Information Technology 11.0103	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 10 DECEMBER 2022
START OF CLASSES 09 JANUARY 2023	PROGRAM START/END DATE 09 JANUARY 2023 - 31 DECEMBER 2024	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 9,589	Personal Funds	\$ 0
Living Expenses	\$ 9,699	Funds From This School	\$
Expenses of Dependents (0)	\$	Family	\$ 21,800
Health Insurance and additional Progra	\$ 2,512	On-Campus Employment	\$
TOTAL	\$ 21,800	TOTAL	\$ 21,800

REMARKS

Mandatory orientation for enrollment begins January 3, 2023.

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 *Rebecca Leevey*

SIGNATURE OF: Rebecca Leevey, International Student Advisor	DATE ISSUED 03 October 2022	PLACE ISSUED LEES SUMMIT, MO
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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: Uma Maheshwari Suroju	DATE		
NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE