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SEVIS ID: N0034054967

SURNAME/PRIMARY NAME Regalla	GIVEN NAME Amrutha	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Amrutha Regalla	PASSPORT NAME	
COUNTRY OF BIRTH INDIA	COUNTRY OF CITIZENSHIP INDIA	
CITY OF BIRTH Venkatapuram	DATE OF BIRTH 28 JANUARY 2002	
FORM ISSUE REASON INITIAL ATTENDANCE	ADMISSION NUMBER	

SCHOOL INFORMATION	
SCHOOL NAME Portland State University Portland State University	SCHOOL ADDRESS PO Box 751, Portland, OR 97207
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Michael TURAY International Admissions Processor	SCHOOL CODE AND APPROVAL DATE PO0214F00056000 30 JANUARY 2003

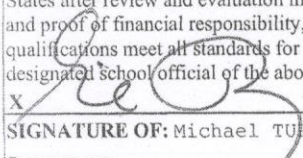
PROGRAM OF STUDY		
EDUCATION LEVEL MASTER'S	MAJOR 1 Electrical and Computer Engineering 14.4701	MAJOR 2 None 00.0000
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 19 AUGUST 2023
START OF CLASSES 26 SEPTEMBER 2023	PROGRAM START/END DATE 18 SEPTEMBER 2023 - 31 MARCH 2026	

FINANCIALS	
ESTIMATED AVERAGE COSTS FOR: 9 MONTHS	STUDENT'S FUNDING FOR: 9 MONTHS
Tuition and Fees \$ 25,064	Personal Funds \$ 0
Living Expenses \$ 20,217	Funds From This School \$ 0
Expenses of Dependents (0) \$ 0	Family in India \$ 45,281
Other \$ 0	On-Campus Employment \$ 0
TOTAL \$ 45,281	TOTAL \$ 45,281

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.

X  **DATE ISSUED** 06 March 2023 **PLACE ISSUED** Portland, OR

SIGNATURE OF: Michael TURAY, International Admissions Processor

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: Amrutha Regalla **DATE**

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