THE FLORIDA STATE UNIVERSITY
Center for Global Engagement

F-1 Check-In Form

The following documents are required to complete the New International Student Check-In.

- ❑ This form, completed
- ❑ Your (and any dependents') I-20(s)
- ❑ Your (and any dependents') passport(s)
- ❑ Your (and any dependents') I-94(s), printed from https://i94.cbp.dhs.gov/I94/

NAME: _____ _____
LAST (FAMILY) FIRST (GIVEN)

DATE OF BIRTH: ☐☐ ☐☐ ☐☐☐☐
Month Day Year

Do you have any dependents with you in F-2 visa status? ☐ No ☐ Yes

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Report your current Tallahassee address. This must be a physical street address, not a PO box, University Box or department address.

If you have not yet found an apartment, please write your temporary address (hotel, friend's house, etc). **Every time you move**, you must report your address to the CGE **within 10 days** as required by federal law. Report your address change using the **Address Change Form** found at cge.fsu.edu/forms

TALLAHASSEE ADDRESS (Physical) *You must have a valid Tallahassee address to complete check in.*

_____ _____
STREET, NUMBER, AND NAME APT/ROOM #

Tallahassee, FL 3 2 3 ☐ ☐
POSTAL CODE

U.S. MAILING ADDRESS, if different from above

_____ _____
STREET, NUMBER, AND NAME APT/ROOM #

_____ _____ ☐☐☐☐☐
CITY STATE POSTAL CODE

PHONE **(850)** - ☐☐☐ - ☐☐☐☐ ☐☐☐ - ☐☐☐ - ☐☐☐☐
LOCAL (LANDLINE) CELL/MOBILE

Personal Email Address (e.g. Gmail, Yahoo, etc.): _____

FSU Email: _____ @my.fsu.edu

EMERGENCY CONTACT (in or outside the U.S.)

NAME: _____ _____
LAST (FAMILY) FIRST (GIVEN)

ADDRESS: _____ _____
CITY

_____ _____ _____
STATE/PROVINCE COUNTRY POSTAL CODE

EMAIL: _____ **PHONE:** _____

RELATIONSHIP: ☐ **SPOUSE** ☐ **FATHER** ☐ **MOTHER** ☐ **SIBLING** ☐ **FRIEND** ☐ **OTHER:** _____

Office Use Only: Date _____ I-94 _____ Address _____ Note _____ Hold _____ Registration _____