

Immigration Document Copy Request

- This form is used to request a copy of the immigration documents listed below from the ISSS office.
- Please note that depending on your years of attendance, we may not have copies of your items on record.
- Unfortunately the U.S. Department of State does not allow us to give copies of DS-2019s at any time.
- **IMPORTANT:** You must submit your request **at least 2 weeks in advance** of when you need them. We cannot process rush requests as this is a courtesy service.

Biographical Data		
Family Name:	First and Middle Name:	Birth Date (MM/DD/YYYY):
Phone Number:	UNT Student ID:	
Email Address:		

Document(s) Requested
<input type="checkbox"/> All UNT I-20s on file. <input type="checkbox"/> Government issued document(s) received by our office, such as EAD cards, receipt notices, etc. (include document date MM/DD/YYYY): <hr/> <input type="checkbox"/> Other (include document date MM/DD/YYYY):

Receiving Document(s)
<input type="checkbox"/> Pick Up in Person: Either you or an authorized representative may pick up your document(s) in person during our regular office hours. If a representative will pick up your items, please list their name below. Note that photo identification will be required during pick up. Representative Name: _____
<input type="checkbox"/> U.S. Postal Mail (For U.S. Addresses Only): Enter the U.S. mailing address below if you would like us to mail your documents to you. Please note that once mailed, your documents may take up to 5 business days to arrive. Street Address: _____ City: _____ State: _____ Zip Code: _____
<input type="checkbox"/> Express Mail via eShipGlobal: If you'd like your documents to be sent express mail, please go to the eShipGlobal website https://study.eshipglobal.com to set up and pay for your express mail order. Be sure that you sign up as a student to receive documents from the University of North Texas, and choose "UNT-International Advising" as the department.

I have fully completed the above information and understand the regulations regarding this process:
If I have any questions, I will consult with an ISSS Advisor.

Signature: _____	Date: _____
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