



International Students

Student Information Form

For students requesting an I-20

Please complete this form and return it to the International Student Services office.
Completed forms may also be scanned as a PDF and emailed to international@hfcc.edu.

Student Name (as it appears in your passport)

Last /Family/Surname: _____ First/Given Name: _____

Middle Name: _____ Date of Birth: Month _____ Day _____ Year _____

Country of Birth: _____ Country of Citizenship: _____

Email Address: _____ Planned program of study at HFC: _____

Are you bringing a spouse or child along with you? Yes No

Address in Country of Residence (full address is required)

Street name and house/apartment number: _____

City: _____ State/Province/District: _____

Country: _____ Postal Code: _____

If no postal address, please provide a description for mailing purposes: _____

Address in the United States (while attending school—if known at this time)

Number and Street: _____

City: _____ State: _____ Zip code: _____

U.S. home phone: _____ Cell phone: _____

Emergency Contact Person in the United States

Name: _____ Relationship to Student: _____

Address: _____

Home phone: _____ Cell phone: _____ E-mail address: _____

Please permit the contact person to handle my admission process including, but not limited to sending the I-20: Yes No

For **Canadian Citizens** only:

While attending school you will be living in: Canada United States

You will be attending school: Full-time Part-time

Student Signature: _____

Date: _____