

Document Request Form



WASHINGTON UNIVERSITY of VIRGINIA

Student ID

Program

Contact Number

Last Name

First Name

Request: ☐ Regular ☐ Urgent (\$5each)

Item	Q'ty	Cost	Remarks
<input type="checkbox"/> I-20 Reprint		\$10	* Reprint Reason <input type="checkbox"/> Damaged <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Travel <input type="checkbox"/> Updated
<input type="checkbox"/> STEM OPT		\$150	I-983 form and employment letter required
<input type="checkbox"/> Letter of Support (Graduation)		\$20	Please send information about who you wish to invite to DSO@wuv.edu Name, DOB, Relationship, Address (Home Country & USA)
<input type="checkbox"/> Letter of Support For the government (USCIS)		\$20	Details:
<input type="checkbox"/> Support Document		\$5	Please contact registrar for more information
<input type="checkbox"/> Diploma Reprint		\$150	Program: _____ Graduation Year: _____
<input type="checkbox"/> Other		\$20	Any other issues related to an I-20
Delivery Method	1. Free Pick Up in the office <input type="checkbox"/> 2. Email Only (\$5each) <input type="checkbox"/> 3. Mail Service <input type="checkbox"/> (Please choose one option below) <input type="checkbox"/> Domestic Regular (\$5each) <input type="checkbox"/> Priority \$20 <input type="checkbox"/> Express \$50 <input type="checkbox"/> Overseas \$100 _____ Street _____ City State Zip		
TOTAL		\$	

Signature _____ Date _____

Submit: Please upload on myWUV

How to submit files to the registrar office: <https://my.wuv.edu/stu/help/articles/eABY4HbP/show/69>

<OFFICE USE ONLY>

☐ Pick Up ☐ Mail ☐ Email Received by: _____ Date: _____ Completed by: _____ Date: _____