



J-1 Biographical Information

801-863-5345 | www.uvu.edu/global

Family Name: _____ Student ID #: _____

First Name: _____ Gender: Female Male

Middle Name: _____ Birthday: _____

Country of birth: _____ Country of Citizenship: _____

U.S. Local Address

Street: _____ Apartment/Unit: _____

City: _____ State: _____ Zip Code: _____

Cell phone #: _____ Telephone #: _____

Email address: _____

Foreign Address

Street: _____

City/Town: _____ Country: _____

Zip Code: _____ Province/State: _____

Passport #: _____ Expiration Date: _____

Visa # (red): _____ Date of Issue: _____

Expiration Date: _____

Number of Family Dependents (children/spouse): _____

Interested in International Student Council activities? Yes No

Signature: _____ Date: _____

For office use only

I-94/Admission #: _____ Date of Entry: _____