

Severe Economic Hardship Request

updated: 5.7.2020

Request Part I: To Be Completed by Student				
Name:		SEVIS ID:		
Non-UWG Email Address: _				
Date of Birth: (MM/DD/YYYY)		UWG ID: 917		
request the following AT dat submitted to USCIS.	tes and understar	nd these dates ca	nnot be changed once	
Requested Estimated	Month:	Day:	Year:	
Start Date:				
Requested Estimated				
End Date:	Month:	Day:	Year:	
Acknowledgment				
· I certify I have read the reque	est form instruction	s and information	in full	
• I certify the information I have	e provided is, to th	e best of my know	ledge, accurate	
• I understand I (and any F-2 I the duration of my F-1 status	Dependents) must	have UWG approv	ved health insurance for	
• I understand I cannot begin with the card	working until my EA	AD card has arrive	d and I physically possess	
• I understand I must report an ISAP	ny changes (includi	ing financial, emplo	oyment, address, etc.) to	
 I certify the information I have I understand I (and any F-2 I the duration of my F-1 status I understand I cannot begin with the card I understand I must report and 	e provided is, to th Dependents) must working until my Ex	e best of my know. have UWG approv AD card has arrive	ledge, accurate ved health insurance for d and I physically posse	

_Date:_____

Student Signature:

Application Materials

Personal statement and supporting documents
Complete Form I-765
Copies of your current and previous I-20s
Copy of paper or print-out of electronic Form I-94
Copy of your F-1 visa page (Except Canadians) or I-797 (approval of change of status to F-1) if
applicable
Copy of your unofficial transcript available from MyUWG
Two full-face passport style photos

Complete this form and return to:
University of West Georgia • International Student Admissions & Programs • Mandeville • Phone:678-839-4780 • Fax:678-839-5509