



**Center for International Affairs**

**F-1 STUDENTS**  
**REQUIRED SEVIS CHANGE FORM**

**REQUEST FOR:**

- Change of major
- CPT authorization
- Change of program level
- Change of Address

Family name First name \_\_\_\_\_

CSUCI ID # \_\_\_\_\_

New Address: \_\_\_\_\_  
\_\_\_\_\_

(CHECK ONE)

Level of education:	Change?	No	Yes	_____
Major field of study:	Change?	No	Yes	_____
Expected completion date:	Change?	No	Yes	_____

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

OPT and CPT applicants only

Describe proposed employment for CPT or OPT:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested start date: \_\_\_\_\_

Ending date: \_\_\_\_\_

Hours per week: \_\_\_\_\_

Submitted to SEVIS on \_\_\_\_\_

Not submitted to SEVIS \_\_\_\_\_