



Cultural Center for Language Studies
Fluency in Languages

DEPENDENT FORM

Complete all fields for each dependent. Only the spouse and unmarried children under the age of 21 can be dependents of an F-1 student.

Applicant's name, as shown on the passport:

First and Middle Names (if applicable)	Last Name

Dependent 1:

First and Middle Names (if applicable)	Last Name

Note: Name must match the passport. Please submit a copy of the passport identification page along with this application

Relationship to the student: () Spouse () Child

Date of birth (month/day/year): _____ Gender: () Male () Female () Unspecified

Nationality: _____ Country of birth: _____

Email: _____ Contact Number: _____

Dependent 2:

First and Middle Names (if applicable)	Last Name

Note: Name must match the passport. Please submit a copy of the passport identification page along with this application

Relationship to the student: () Spouse () Child

Date of birth (month/day/year): _____ Gender: () Male () Female () Unspecified

Nationality: _____ Country of birth: _____

Email: _____ Contact Number: _____

Please upload a copy of each dependent's passport identification page. The I-20 can only be processed when all required documentation, signed by the applicant, is received, reviewed, and approved by CCLS New Jersey.