

Department of Homeland Security  
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status  
OMB NO. 1653-0038

SEVIS ID: N0032459445

<b>SURNAME/PRIMARY NAME</b> Shinde	<b>GIVEN NAME</b> Archana	<b>Class of Admission</b>  <b>F-1</b>  <b>ACADEMIC AND LANGUAGE</b>
<b>PREFERRED NAME</b> Archana Shinde	<b>PASSPORT NAME</b>	
<b>COUNTRY OF BIRTH</b> INDIA	<b>COUNTRY OF CITIZENSHIP</b> INDIA	
<b>CITY OF BIRTH</b> Hyderabad	<b>DATE OF BIRTH</b> 11 MARCH 1996	
<b>FORM ISSUE REASON</b> INITIAL ATTENDANCE	<b>ADMISSION NUMBER</b>	

**SCHOOL INFORMATION**

<b>SCHOOL NAME</b> Marist College Marist College	<b>SCHOOL ADDRESS</b> 3399 North Road, Poughkeepsie, NY 12601
<b>SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL</b> Deborah Holtman Director of International Student Services	<b>SCHOOL CODE AND APPROVAL DATE</b> NYC214F00268000 28 JANUARY 2003

**PROGRAM OF STUDY**

<b>EDUCATION LEVEL</b> MASTER'S	<b>MAJOR 1</b> Computer/Information Technology Services Administration and Management, Other 11.1099	<b>MAJOR 2</b> None 00.0000
<b>PROGRAM ENGLISH PROFICIENCY</b> Required	<b>ENGLISH PROFICIENCY NOTES</b> Student is proficient	<b>EARLIEST ADMISSION DATE</b> 19 DECEMBER 2021
<b>START OF CLASSES</b> 18 JANUARY 2022	<b>PROGRAM START/END DATE</b> 18 JANUARY 2022 - 31 DECEMBER 2024	

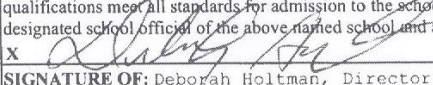
**FINANCIALS**

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 15,790	Personal Funds	\$ 0
Living Expenses	\$ 8,220	Scholarship	\$ 1,000
Expenses of Dependents (0)	\$ 0	family	\$ 31,139
Bks, Trans, Health, Misc.	\$ 8,129	On-Campus Employment	\$
<b>TOTAL</b>	<b>\$ 32,139</b>	<b>TOTAL</b>	<b>\$ 32,139</b>

**REMARKS**

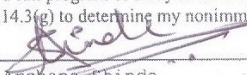
**SCHOOL ATTESTATION**

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

X  **DATE ISSUED** 29 October 2021 **PLACE ISSUED** Poughkeepsie, NY  
**SIGNATURE OF:** Deborah Holtman, Director of International Student Services

**STUDENT ATTESTATION**

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. Parent or guardian, and student, must sign if student is under 18.

X  **DATE** 07/01/2022  
**SIGNATURE OF:** Archana Shinde  
X  
**NAME OF PARENT OR GUARDIAN** **SIGNATURE** **ADDRESS (city/state or province/country)** **DATE**