

UNIVERSITY OF HAWAI'I AT MANOA
International Student Services
QLCSS Room 206
Honolulu, HI 96822
Phone: (808) 956-8613 FAX: (808) 956-5076
www.hawaii.edu/issmanoa

REQUEST FOR F-2 AND J-2 VISAS FOR SPOUSE AND/OR CHILDREN

The University of Hawaii at Manoa encourages families to share the study abroad experience. Students on an F-1 or J-1 visa status may request to have their spouses and children join them after verifying that there are sufficient funds for these dependents. Living costs in Hawaii are very high and the needs of the family are important for everyone's well being. Please review the requirements below before applying for permission to bring your dependents and complete the Certification of Funding for Family Support on the reverse side.

1. To verify that you have adequate resources to meet expenses of your spouses and/or children, submit the following and note your annual resources on the form:
 - A. A bank statement showing a minimum of \$4,000 extra funds available for spouse and \$4,000 each child under 18 years of age to cover their expenses for one year.
 - B. Verification of scholarship, grant, GA/TA contract, employment or letter(s) or affidavits of support for your spouse and/or children.

2. To help you complete the annual expenses section of the form, the following represent normal or reasonable expected costs:
 - A. Family Health Insurance:
 1. BOR employees: (graduate assistants) \$125 - 201 per month, (\$1,500 - 2,412 per year)
 2. UH Student Medical Plans For Family
Student and 1 dependent: \$100 - 128/month (\$1,194 - 1,533/year)
Student and 2 dependents: \$149 - 183/month (\$1,788 - 2,197/year)
 - B. Minimum expenses for student and spouse/family per month:

Rent	\$500.00 (1 to 2 dependents)
Utilities (electricity/phone)	\$75.00
Food	\$300.00 (1 dependent)
	\$400.00 (2 dependents)
	\$500.00 (3 dependents)
Transportation	\$30 per person per month
 - C. Miscellaneous: \$50.00 per month per person

3. Your documents will be reviewed. If you meet requirements, Form I20/DS-2019 will be issued to you to send to your family. Your family must present financial documents and Form I-20/DS-2019 to the American Consulate official who then makes the final decision.

4. Proof of insurance for your family must be submitted to the foreign student advisor within two weeks of their arrival in the United States.

NOTE: F-2 visa holders may NOT accept employment. J-2 visa holders may request permission to work from the Immigration Services after their arrival in the United States in order to support themselves, but not the J-1 visa holder.

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CERTIFICATION OF FUNDING FOR FAMILY SUPPORT

FAMILY NAME _____ FIRST NAME _____

VISA STATUS _____ HOME COUNTRY _____

DATE OF ARRIVAL IN U.S. _____

ANNUAL RESOURCES FOR FAMILY

ANNUAL EXPENSES

		SELF	SELF + FAMILY
Family	\$ _____	Rent \$ _____	_____
Personal Savings	\$ _____	Utilities	_____
Grant/Stipend	\$ _____	(elec.,phone)	\$ _____
U.S. Salary	\$ _____	Food	\$ _____
Home Country Salary	\$ _____	Health Ins.	\$ _____
Other	_____	Transportation	\$ _____
Source _____	\$ _____	Personal	\$ _____
		Education Self:	\$ _____
		Family:	\$ _____
		Child Care	_____
		Other	\$ _____
TOTAL	\$ _____	TOTAL	\$ _____

State your government's restrictions on sending funds from your home country:

Family Membes you intend to bring:

Name (Family, First)	Relationship	Birthdate	Birthplace	Nationality
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I certify that the information I have provided is true and that I am financially able to support the expenses of my family.

_____ Signature _____ Date

ISO Approval: _____ Date _____

Please issue I-20 / DS-2019

Comments: _____
