



Samuel Merritt University
Global Health Initiative (GHI)

Arrival Confirmation Form

This document is required to be filled out **after** your arrival to the United States and within 10 days of arrival. This information is necessary and required for your student and immigration records. ALL SECTIONS ARE MANDATORY.

Contact Information

Family Name/Surname

First Name

Date of Birth (mm/dd/yyyy)

SMU Student ID Number

SMU Email Address

Degree Program

U.S Address

Street Number/Name

Apt Number

City

State

Zip Code

Home Country Address

Street Number/Name

Apt Number

City

State

Zip Code



Arrival to the United States Information

Have you entered the United States?

Yes

No

Date of Entry

Port of Entry (City and Airport)

By signing, I hereby confirm that all the information provided in this document is accurate and complete to the best of my knowledge.

Signature

Date