

UCLA - Dashew Center for International Students and Scholars  
**F-1 SOCIAL SECURITY DENIAL LETTER REQUEST**

Student's Name: \_\_\_\_\_  
Last Name First Name

UCLA ID#: \_\_\_\_\_ SEVIS ID #: N \_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
Month Date Year

I-94 Card #: \_\_\_\_\_ Degree Start Term: \_\_\_\_\_  
(as indicated on your I-20 form)

Reason for Request: Driver License/CA ID Mobile Phone  
Banking/Opening a Bank Account Apartment Rental

***F-2 Dependent's Information (if request is for F-2 dependent)***

Dependent's Name: \_\_\_\_\_  
Last Name First Name

Dependent's Citizenship: \_\_\_\_\_ SEVIS ID #: N \_\_\_\_\_

Dependent's Date of Birth: \_\_\_\_\_  
Month Date Year

Dependent's I-94 Card #: \_\_\_\_\_

Reason for Request: Driver License/CA ID Mobile Phone  
Banking/Opening a Bank Account Apartment Rental

<b>FOR OFFICE USE ONLY</b>	<b>INIT:</b> _____ <b>DATE:</b> _____		
	<input type="checkbox"/> <b>Restriction Holds</b>	<input type="checkbox"/> <b>Current Enrollment</b>	<input type="checkbox"/> <b>Past Enrollment</b>