

Office of
International
Students and
Scholars

Worcester
Polytechnic
Institute

100 Institute Rd
Worcester
Massachusetts
01609-2280

Phone:
508.831.6030

Email:
ih@wpi.edu

Invitation Letter for Family to Visit Request Form

Please allow TWO (2) business days for processing.
You will be emailed when the letters are ready for pick-up.

Please Write Clearly

Today's Date (MM/DD/YYYY): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

WPI ID Number: _____ ☐ Male ☐ Female

Degree: ☐ BS ☐ MS ☐ PhD ☐ Exchange

Major Field of Study: _____

Program End Date: _____

Visa Status: ☐ F1 ☐ J1 ☐ Other: _____

Status: ☐ Current Student ☐ On OPT ☐ Other: _____

Name and Relationship of Each Person you are Inviting:

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____

LAST Name (Surname): _____

FIRST Name (Given Name): _____

Relationship (Include Gender): _____