In keeping with the compliance of the Federal Government: U.S. Immigration and Customs Services requires Haverford College to keep and update your SEVIS record. This form is to be completed by F-1 student who is leaving the Haverford College upon graduation, taking a leave of absence for a semester, a year, studying abroad, transferring to another F-1 approved institution or, for a period of time longer than 5 months. The form should be submitted to the International Student Services Office (ISSO).

NOTE: This form does not replace the required In/Out Notification Letter to your dean.

1. Student’s Name: ____________________________       ___________________________      ______________________
   Family name                                      First name                                      Middle

2. Student ID #: ____________________________

3. Class Year: [ ]

4. SEVIS ID #: ____________________________

5. Email address: ____________________________     6. Phone: ____________________________

Instructions: Please read through the options below. Select the situation that applies to you and sign at the bottom of the 3rd page.

Part 1. Completion of F-1 Program or Studies / Leaving the United States

☐ I have completed my academic program or studies and plan to depart the U.S.
☐ I am not interested in applying for OPT.
   • Your SEVIS record will change to a status of “Completed.”
   • You must depart the U.S. within 60 days of your degree completion date.
   Date of completion: [ ] [ ] [ ] [ ]

Part 2. Completion of OPT (Post)

☐ I have completed OPT and plan to depart the U.S.
   • Your SEVIS record will change to a status of “Completed.”
   • You must depart the U.S. within 60 days of your OPT completion date.
☐ I am reaching 90 days of unemployment.
   • Your SEVIS record will change to a status of “Completed.”
   • If you have notified ISSO prior to the 90th day, you have 60 days to depart the U.S., get admitted to a new program, or gain another status.
   • If you did not report this information prior to the 90th day, you must leave the U.S. immediately.
   Date of completion: [ ] [ ] [ ] [ ]

Part 3. Transfer

☐ I am transferring to another U.S. F-1 Approved institution.
   • Your SEVIS record will be transferred to your new school on the “release date” that you indicate below.
   • The “release date” must be after you have completed all coursework.
   • You must NOTIFY ISSO PRIOR TO YOUR RELEASE DATE if your plans change. ISSO cannot access your SEVIS record to make changes after the date has passed.
   • Request the Transfer Out Form from the ISSO.
   Date of completion: [ ] [ ] [ ] [ ]

   Date of departure from the U.S.: [ ] [ ] [ ]

   [ ] [ ] [ ]

   [ ] [ ] [ ]

   [ ] [ ] [ ]
Part 4. Change of Visa Status

☐ I will petition or have petitioned to change my visa status to ____________________.

☐ If you are applying for a new visa status, the application must be received by USCIS within 60 days of your degree, exchange program, or OPT completion date.

☐ My change of status has been approved. New visa type ____________________

☐ Please provide a copy of the I-797 approval form for our files.

Part 5. Study Abroad Program (under the auspices of the Office of International Programs at the College)

☐ I am participating in a study abroad program.

Location: ________________________________

Mailing Address: _____________________________________________________________

____________________________________________________

Contact Telephone Number: __________________________

☐ Your SEVIS record will remain active during your absence.

☐ You must be pursuing a full-time course of study during your absence. Obtain a letter from your academic adviser authorizing that you will be engaged in a full-time study abroad program that meets your degree requirements. Carry that letter with you when you travel.

☐ Prior to returning, ensure that you have a valid re-entry signature on page 3 of your I-20.

Date of departure from the U.S. _______ _______ _______ Expected month/year of return _______ _______ _______

Part 6. Leave of Absence or Withdrawal

☐ I am taking a leave of absence of more than five months; or

☐ I am withdrawing from Haverford College.

☐ Your SEVIS record will be terminated with the reason “Authorized Early Withdrawal.”

☐ You have 15 days from your withdrawal date to depart the U.S.

☐ If you intend to resume FULL-TIME studies at the College, you will be required to notify ISSO on [December or March] for a new I-20 prior to your intended return via email.

FINANCIAL DOCUMENTS WILL BE REQUIRED BY HAVERTORD COLLEGE ISSO BEFORE A NEW FORM I-20 WILL BE ISSUED.

☐ If you return to the College, you must be a full-time student for one academic year before applying for OPT.

☐ You will be required to pay the SEVIS fee again.

Date of withdrawal from classes _______ _______ _______ Must depart the U.S. no later than _______ _______ _______

Date of departure from the U.S. _______ _______ _______ Expected month/year of return (if applicable) _______ _______ _______

Part 7. Other

For a medical leave of absence, documentation from a medical provider should be attached.

Date of departure from the U.S. _______ _______ _______
Part 8. Contact Information After Departure

Forwarding Address: ____________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Telephone Number: ____________________________________________________________

Part 9. Understanding of Grace Period

Under your F-1 status, you are allowed to remain in the U.S. for a 60-day grace period.

Part 10. Signature

STATEMENT: I certify that I have discussed my intended departure with the ISSO adviser and I understand how my departure affects my F-1 SEVIS record and my ability to return to the U.S. in the future. I will notify ISSO immediately if my plans change.

Student’s Signature ____________________________________________________________

Month __  Day __  Year __

ISSO will complete this section:

Date submitted to ISSO __ __ __ __ __ __

Month __  Day __  Year __

International student adviser initials _______