F-1 International Student Departure Form

International students who are no longer going to be in the U.S. on F-1 student status sponsored by St. Olaf College should present this completed form to an international support staff member. If you have any questions please do not hesitate to ask Caitlin Lamont Kreienkamp or Brisa Zubia.

Student Information:

Name: _____ _____ _____
Last/Family/Surname *First/Given* *Middle*

SEVIS ID #: _____ SEVIS Program End Date (as listed on your I-20): _____

Phone number (post St. Olaf): _____ Non-St. Olaf e-mail: _____

Post St. Olaf Address: _____

Completion of Degree:

Your SEVIS record will change to a status of 'Completed.' You must depart the U.S. within 60 days of your program end date. Delayed departure may affect your ability to receive a U.S. visa and/or future reentry to the U.S. You also understand that if you choose to depart the U.S. without applying for OPT, you will no longer have the option to pursue OPT. If in doubt about your immigration options after your St. Olaf program you may want to consult with an immigration lawyer.

☐ I have completed my academic program and plan to depart the U.S.

Program end date (DD/MM/YYYY): _____ Date of departure from the U.S. (DD/MM/YYYY): _____

Transfer to another U.S. Institution:

Your SEVIS record will be transferred to your new school on the release date indicated below. The release date must be after you have completed all coursework, employment at St. Olaf College, and any off-campus authorized employment. You MUST notify the Assistant Director prior to your release date if your plans change. The Assistant Director cannot access your SEVIS record to make changes after the release date.

☐ I am transferring to another U.S. institution.

Full name of new school: _____ City and State: _____

New school's SEVIS code: _____ Transfer release date (DD/MM/YYYY): _____

You are required to present a copy of your official letter of acceptance to the new school. Often schools have a transfer in form, if that is the case the Assistant Director will help complete and submit the transfer form to your new institution.

Option 3, Completion of OPT or STEM OPT:

☐ I have completed OPT or STEM OPT and plan to depart the U.S.

Date of OPT or STEM OPT completion (DD/MM/YYYY): _____

Date of departure from the U.S. (DD/MM/YYYY): _____

Your SEVIS record will be changed to a status of 'Completed.' You must depart the U.S. within 60 days of your program end date. Delayed departure may impact your ability to receive a U.S. visa and/or future reentry to the U.S.

☐ I am reaching 90 days of unemployment or 150 days of cumulative unemployment for STEM OPT

Expected 90th/150th day of unemployment (DD/MM/YYYY): _____

Date of departure from the U.S. (DD/MM/YYYY): _____

Your SEVIS record will be changed to a status of 'Completed' if you have notified the Assistant Director prior to the 90th/150th day of unemployment. You then have 60 days to depart the U.S., be admitted to a new academic program, or gain another visa status. If you did not report this information prior to the 90th/150th day, you must leave the U.S. immediately and have no grace period.

Option 3, Change of Visa Status:

If you are applying for a change of nonimmigrant status, the application must be received by USCIS while you are maintaining your F-1 status or within your 60 day grace period following degree completion or OPT or STEM OPT completion date. Please provide a copy of the I-797 approval notice or green card for our files.

☐ I have applied to change my nonimmigrant status to _____

☐ My change of status has been approved. My new visa status is_____ and is effective

(DD/MM/YYYY): _____

Other:

Reason: _____

Intended date of departure from the U.S. (DD/MM/YYYY): _____

Signature:

I certify that I have discussed my intended departure with the Assistant Director 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 the Assistant Director immediately if my plans change.

Signature _____ Date_____

Printed Full Name _____