

VALENCIA

Departure Form

Important Reminder for Students: Reasons for departure include: completion of program, early withdrawal from classes and break from my studies due to an emergency.

F-1 students who have received permission to leave their IEP program early must depart within 15 days.

Please complete below:

First (Given) Name:	Today's date:
Last (Family) Name:	Current Language Level:
Gender: Female <input type="checkbox"/> Male <input type="checkbox"/>	Completed Language Level:
Date of Birth (MM/DD/YYYY)	Address:
Country of Birth:	Apt.#
Last Day of Current Class:	City:
Session Return Date:	Telephone:
Program End Date:	Email:

Withdrawing from Valencia's IEP program: (please select one of the following):

- I have not completed the initial 12 week program and will withdraw from my classes. I understand that my SEVIS I-20 record will be terminated and **I will not receive a refund.**
- I will take a break due to a family emergency.
- I have completed my program and will be leaving the U.S. within 60 days.
- I will be outside the U.S. for more than five months. I understand that my SEVIS I-20 will be terminated.
- I will be outside the U.S. for less than five months. I understand that my SEVIS I-20 will be terminated.

Note: I understand my departure date will be submitted to SEVIS and I will not be able to re-enter the U.S. on my current SEVIS I-20 if I leave early from Valencia's IEP program. In order to return to the U.S. and return to Valencia's IEP program, I will need to apply for readmission one month before my requested return date in order to get a new SEVIS I-20.

Student's Signature: _____ Date: _____

FOR OFFICIAL USE ONLY: Date Received ___/___/___ Duration of Departure: _____

DSO Initials: _____ CSC Initials: _____ SEVIS updated on ___/___/___

Updated in Continuity on ___/___/___

Advisor's Signature: _____ Date: _____

Comments: _____