



REQUEST TO END F-1/J-1 STATUS

Section A: Student Information	
LAST (FAMILY) NAME in Passport:	FIRST NAME in Passport:
DATE OF BIRTH (mm/dd/yyyy)	DU ID Number:
I hereby authorize the release of any information necessary for this request and authorize any changes needed to complete my request.	
STUDENT SIGNATURE:	DATE:

ISSS sends all official communications, including important information about your immigration status, to your official @du.edu email address. It is important that you check this account regularly. For information regarding your DU e-mail, visit <http://www.du.edu/uts/helpdesk/docs/email.html>.

I will withdraw from DU and do not intend to return to DU or any other U.S. institution in F-1 or J-1 status within 5 months of my departure.

Withdrawing for: Fall Winter Spring Summer Year: _____

When do you plan to leave the United States? (mm/dd/yyyy): ____/____/____

Reason for Withdrawal:

Contact information after your withdrawal
Name: _____ Phone: _____ Email: _____

SECTION B: For Review with International Student Advisor

I have reviewed the information I have given on this form and I have discussed the topics listed below with an advisor. I understand the implications of withdrawing from DU and will comply with the requirements outlined on this form.

___ **Withdraw From the University**
Graduate students: contact your academic department and follow the Registrar's procedures for withdrawal <http://www.du.edu/registrar/registration/withdrawal.html>
Undergraduate students: contact your academic advisor and follow the Registrar's procedures for withdrawal <http://www.du.edu/registrar/registration/withdrawal.html>

___ **SEVIS Record**
 ISSS will terminate the SEVIS record for authorized early withdrawal.

___ **Departure from the U.S.**
 You must depart the U.S. within 15 days of the date ISSS terminates your SEVIS record.

___ **Employment**
 You must terminate all employment as of the date you withdraw from DU.

STUDENT SIGNATURE:	DATE:
ADVISOR SIGNATURE:	DATE:

FOR OFFICE USE ONLY

Assigned To:	Processing Checklist:	Processing Notes
_____	<input type="checkbox"/> Enrollment checked by _____ <input type="checkbox"/> GA processed ____ / ____ / ____ <input type="checkbox"/> ISA processed ____ / ____ / ____	