

GOING HOME NOTICE

Please present your student ID when you submit this form to the IEP office. If you are not the student named below and need to submit this form on behalf of him or her, you must provide a written consent from the student.

Today's Date: _____/_____/_____
(Month/Date/Year)

Name: _____
First Name Last Name

Student ID: 98____ - ____ - ____ SEVIS #: N _____
Look at top right hand corner of your I-20, first page!

Phone number [required]: (____) _____ - _____

Email [required] Please write very clearly! : _____

Degree/Program: Transfer (AA/AS) / AAS / Short-Term Certificate / SCIE (Circle one)

Major: _____

Did you complete your degree/program? Yes _____ No _____

If No, explain: _____

I AM GOING HOME. Please select ONLY one.

- I have no plan to return to the U.S. in the future.
- It is possible that I will return to the U.S., but not to SCCC.
If you plan to transfer to another school, please refer to the Transfer Guide [also available on-line].
- It is possible that I will return to SCCC after ____ months.

My last quarter (full time) at SCCC will be _____ quarter, 20 ____.

Estimated date of departure from the U.S. : ____/____/20____, if known.
(Month/Date/Year)

Note: If you are going home, your current I-20 from SCCC becomes invalid as of the last date of your attendance.

Database HP fsa

To be completed by Advisor:
SEVIS Update ____/____/____ By _____

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