SMU | INTERNATIONAL STUDENT & SCHOLAR SERVICES
Tel: 214-768-4475 Fax: 214-768-1051 Email: isss@smu.edu

Leave of Absence Request (temporary absence from United States)

Authorized Leave of Absence is a temporary absence (less than *five* months) from your studies and the U.S. Leave of Absences can only be approved by an International Services Specialist. Students in the Graduate Engineering Co-op program will not be authorized for a Leave of Absence without approval by the program director. You will only have 15 days to leave the country from the time you submit this form to the ISSS office or the last day of classes, whichever comes first. At least *one month prior* to your return to the U.S., you must contact an International Services Specialist in order to have your record set back to 'active status.' If your visa will expire while outside the country, you will need to apply for a new F-1 visa before you return. Once you return to the U.S., you will need to bring your travel documents with you to the ISSS office to complete your registration with the U.S. government. If you are out of the U.S. for more than five months, you will need to apply for a new I-20 through the ISSS office. F-1 Students: 8 C.F.R. § 214.2(f)(4)

BIOGRAPHICAL DATA (To be completed by the student)

Family Name	First/Middle Name
SEVIS ID Number	SMU ID Number
Current Degree	Current Program Completion Date

Has any of your personal information changed (U.S. address, phone number, etc.)? □ Yes □ No
If so, please update your information in Access immediately.
Date Leaving the U.S.: __/__/__ Do you plan to return to the U.S.? □Yes □ No If so, When?___/__/___

- □ **I understand that I must leave the United States within 10 days of submitting this form.**
- □ **I understand I am responsible for withdrawing from the University if I am currently enrolled at SMU .**
- □ **I understand that I am responsible for maintaining my SMU email account for correspondence with ISSS.**
- □ **I understand I need to attach a copy of itinerary proving departure from the U.S.**

Please get the following signatures (only those applicable)

Pre-Major: University Advising Center: Laura Lee Blanton Building 408
Dedman Records and Academic Services: Clements 134
Cox: Maguire Building, 252
Meadows: Owen Arts Center 1120
Simmons School of Education: Annette Caldwell Simmons Hall
Lyle Engineering: Embrey 102

Academic Advisor/Degree Counselor's Name:	**Academic Advisor/Degree Counselor's Signature**	**Phone Number**	**Date**
Bursar's Office Name	**Bursar's Office Representative Signature**	**Phone Number**	**Date**

By signing below, I affirm that I understand the consequences of my request. If I have any questions, I will contact an ISSS International Services Specialist immediately.

Print Name:_____ Signature:_____ Date:___/__/___

International Services Specialist:	Signature	Date