

Tel: 214-768-4475 Email: isss@smu.edu

## Re-Entry to the U.S. to Change Status Request (Current Students)

PART I: BIOGRAPHICAL DATA (To be completed by the student)				
FAMILY NAME:		FIRST/MIDDLE NAME:	FIRST/MIDDLE NAME:	
E-MAIL:		SMU ID NUMBER:	SMU ID NUMBER:	
CURRENT U.S. ADDRESS:		CURRENT FOREIGN ADDI	RESS (Home Country Address):	
CITY:		_	_	
STATE:		CITY:	PROVINCE/TERRITORY:	
ZIP CODE:			POSTAL CODE:	
			COUNTRY:	
PHONE:				
COUNTRY OF CITIZENSHIP:		COUNTRY OF BIRTH:	COUNTRY OF BIRTH:	
PART II: CHANGE OF STATUS INFORMATION				
CURRENT VISA STATUS:		CURRENT STATUS EXPIRATION DA	RRENT STATUS EXPIRATION DATE:	
CHANGING STATUS TO:		DATE YOU INTEND TO START NEV	TE YOU INTEND TO START NEW STATUS:	
ARE YOU CURRENT ENROLLED AT SMU? YES NO				
If No, what semester are you going to enroll full-time: SPRING SUMMER FALL OF YEAR:				
PART III: ATTACH THE FOLLOWING DOCUMENTS (To be Completed by Student)				
☐ <b>Original Financial Documentation</b> dated within 6 months, showing enough funds to cover one year of tuition, living expenses, and				
health insurance for you and dependents, if applicable.				
☐ Letter from Academic Advisor Letter from academic advisor must state current academic status and expected completion date. ☐ Copy of Flight Itinerary demonstrating a departure of the U.S. will occur				
PART IV: STUDENT CERTIFICATION OF UNDERSTANDING				
By completing this form, I understand the following:				
☐ I am responsible for notifying the ISSS office for any changes in my travel plans.				
□ I am responsible for paying my new SEVIS fee at fmjfee.com.				
□ I will need to complete one full academic year of F-1 status before I am eligible to engage in practical training (CPT or OPT).				
□ I am responsible for contacting the U.S. embassy in my home country for additional information regarding my visa stamp				
(more information about the visa process can also be found on the Department of State website: <u>usvisas.state.gov</u> ).				
□ I am not guaranteed readmission into the United States.				
□ I acknowledge that I will only be allowed to enter the U.S. up to 30 days prior to the start date of my I-20.				
□ I acknowledge that upon entrance into the U.S., I will need to bring all of my immigration documents and do a "Document Check-In" with the ISSS office.				
☐ I acknowledge that I will need to complete the International Student Compliance (ISC) course in Canvas prior to my Document				
Check-In.				
☐ I acknowledge that the hold on my account will not be removed until I have completed the ISC course and have successfully				
complete the Document Check-In.				
By signing below, I certify that I have read and understood the terms for which I can change statues. Should my plans change, I will				
notify the ISSS immediately.				
Student Signature: Date:				
ISSS Use Only	Processed By:		Date:	
	☐ Added to ISC course		Date.	