



SEVIS Record Withdrawal Request

PART I: BIOGRAPHICAL DATA (To be completed by the student)

FAMILY NAME:	FIRST/MIDDLE NAME:
SEVIS ID NUMBER:	SMU ID NUMBER:
CURRENT MAJOR ON I-20/DS-2019:	CURRENT PROGRAM END DATE ON I-20/DS-2019:

PART II: WITHDRAWAL INFORMATION (To be completed by the Student)

<input type="checkbox"/> I will take an Authorized Leave of Absence	
<input type="checkbox"/> I am on OPT, will depart the U.S., and will not return to the U.S. with my current F-1 record <i>Once form is submitted, all employment must cease immediately.</i>	
<input type="checkbox"/> My status has changed to: _____	
Date Leaving the U.S.:	Return Date (if known):

PART III: STUDENT CERTIFICATION OF UNDERSTANDING (To be completed by the student)

I understand the following:

- I must leave the United States within 15 days of submitting this form. If you do not leave the U.S. within the stated times, you will be out of status and in the country without authorization.
- I understand that submitting this withdrawal request only affects my immigration record. If I need to withdraw my academic record, I will need to contact my academic advisor and/or the University Registrar.
- I understand that I might need to consult other departments on campus to ensure that withdrawing will not affect my status, such as: Residential Life & Student Housing (if living on campus), academic department (if TA/RA), Student Financial Services/Bursar's Office (scholarships).
- I understand that I am responsible for maintaining my SMU email account for correspondence with ISSS.
- I understand I may NOT use my student visa to re-enter the U.S., unless my SEVIS record has been reactivated or I have been issued an initial I-20.
- I understand if I intend to return to SMU within 5 months from my last day of full-time enrollment, I will need to contact the ISSS Office 2 months before my return in order to submit a request to reactive my SEVIS record to "active" status.
- I understand that if I intend to return to SMU after five months from my last day of full-time enrollment, I will need to get an initial I-20 and will be required to wait at least one academic year before eligible for any practical training.

I certify that I have read and understood the information above and that the information I have provided on this form is true to the best of my knowledge.

Student Signature: _____ Date: _____

Please attach the following documents:

- Copy of itinerary proving departure from the U.S. or Copy of visa or approval notice of new status, if applicable.

ISSS Use Only	APPROVED	DECLINED	DATE
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