

International Programs 6500 Pacific Blvd. SW, RCH 120 & 122 Albany, OR 97321 Email: internationaladmissions@linnbenton.edu

International Student Departure Form

Personal Information

| Name | | | LBCC ID (X) Number | | | |
|--|---|-------------------|--|-----------|--|--|
| I-20 Expiration Date | | SEVIS ID | S ID | | | |
| Purpose of | this Request | | | | | |
| • Leav | e of Absence Term | : | Departure Date | e://_ | Return Date:// | |
| | Must be requested b | y last day to ADL | O classes. Requires | a meeting | with a DSO. | |
| • Early | w Withdrawal Term | : | Departure Date | e://_ | Return Date:// | |
| Requires a meeting with a DSO. | | | | | | |
| | □ I intend to resume my studies at LBCC within less than 5 months of my departure date. □ I intend to resume my studies at LBCC more than 5 months after my departure date. □ I have been suspended from LBCC and am leaving the United States. □ I do not intend to return to LBCC. | | | | | |
| • Transfer Out SEVIS Transfer Date/ (determined by the DSO) | | | | | | |
| Requires a copy of your acceptance letter to the new school. | | | | | | |
| | Name of New School: Start Date: | | | | | |
| · Com | plete Program/Gra | duation | Гегт: | | Departure Date:// | |
| • Requires leaving the U.S. within 60 days (grace period). | | | | | | |
| Please complete this short form to provide your feedback: https://docs.google.com/forms/d/1s_aL75mvgk-DD4u0MwZ4hS_kEtAhlQkeoS6L8_1 JCIw/prefill | | | | | | |
| Student's Signature | | | Date: | | | |
| Non-LBCC E | mail: | | | | | |
| ADVISOR NOTES | ☐ Approved☐ Denied | □ Iı | Banner Notes nactive Attribute GASTDN | Regroup | Insurance ☐ Charge ☐ Hold ☐ Update Spreadsheet | |