

## Student Departure Form

Family Name	First Name	Middle	Visa Category
GSU ID	SEVIS ID	Date of Birth (mm/dd/yy)	GSU Email Address
Phone Number	Academic Department		

**Please Select the Option that Applies to You:**

- I will leave the U.S. and return to my home country **before** completing my degree/program
- I will leave the U.S. and return to my home country **after** completing my degree/program
- I no longer need my **OPT/AT** and I will return to my home country
- I will change from my current status to a **new status**
  - Please attach evidence of your new status with this form
  - Current status: \_\_\_\_\_ New status: \_\_\_\_\_
- I will leave Governors State University and **transfer** to another U.S. institution
  - Please attach an admissions letter from the other institution with this form
  - Name of the new institution: \_\_\_\_\_
- Other** reason: \_\_\_\_\_
 

Please specify your reason for leaving if not listed above

Effective \_\_\_\_\_ (Month/Day/Year) I will no longer need the benefits associated with my current non-immigrant status that is sponsored by Governors State University. For transfer students, please indicate your SEVIS release date here. If your current non-immigrant status is not sponsored by Governors State University, then please indicate here the last date that you will attend classes.

Signature of Student

Date