



A student in F-1 status is expected to be enrolled every session until s/he completes her/his program of study. If you will not be registered for an upcoming session due to personal reason and you need to leave the U.S., your SEVIS record cannot remain in an active status. In order for your SEVIS record to be appropriately updated, you must apply for an Authorized Early Withdrawal.

Once your Authorized Early Withdrawal is granted, you must depart the U.S. within 15 days following the withdrawal date noted in SEVIS. If you do not depart within 15 days of the authorization, Office of International Student & Scholar Services (OISSS) will not be able to re-activate your SEVIS record in the future. To reactivate your SEVIS record and no break in your SEVIS program, you must return to the U.S. within five months of departing the U.S. and contact the ISSS no later than 30 days before your planned return date. Upon receiving your request, ISSS will contact the SEVIS Help Desk to request that your SEVIS record be reactivated. DSOs now can initiate the request to reactivate your status up to 60 days before you are scheduled to return and enroll.

If you are outside of the US for more than five months and want to resume your studies at TAMUK, you will need to:

- Apply for a new Form I-20
- Pay the SEVIS fee
- Apply for a new visa
- Be in F-1 status for at least one academic year before being eligible for most types of off-campus employment.

| | | |
|---|-------------------|---------------|
| (First name) | (Middle name) | (Family name) |
| (KID number) | (SEVIS ID number) | (Visa type) |
| Date of Withdrawal from Program or Leave of Absence Start Date: | | |
| Reason for departure (check one): | | |
| <input type="checkbox"/> Family responsibilities | | |
| <input type="checkbox"/> Military service | | |
| <input type="checkbox"/> Medical | | |
| <input type="checkbox"/> Other (provide a brief explanation): _____ | | |
| _____ | | |

| | |
|----------------------|---------------|
| Student's signature: | Today's date: |
|----------------------|---------------|

To be completed by the student's academic advisor or department head:

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|---|-------------------------------------|
| Have you discussed the academic implications of the leave of absence or withdrawal with the student? <input type="checkbox"/> yes <input type="checkbox"/> no | |
| Your name and title: | Your email address: _____@tamuk.edu |
| Your signature: | Date: |