

J-1 NOTICE OF DEPARTURE

Last Name: _____ First Name: _____

NMUIN: _____ SEVIS ID: N _____

NMU E-mail: _____ Alternate E-mail: _____

NMU Completion Date: ____/____/____ U.S. Departure Date: ____/____/____

FUTURE PLANS: (Please check appropriate item):**Departing the U.S. and ending current J-1 program.**

If you are in the Research Scholar or Professor category, you will not be able to begin a new program in the Research Scholar or Professor category for the next two years.

End date of activity at NMU: ____/____/____ Date of departure from the U.S.: ____/____/____

Note: If your departure date is more than 30 days in advance of the program end date on your DS-2019, we will create a new DS-2019 for you with your actual end date. It is important that you have official documentation of your actual program dates.

SCHOLARS ONLY: Departing the U.S. and continuing your J-1 scholar program in another country for one year or less.

Date of departure from NMU: ____/____/____ Date of departure from the U.S.: ____/____/____

Date of return to U.S.: ____/____/____ Date of return to NMU: ____/____/____

Note: If you choose this option, this form must be accompanied by a letter from your NMU department (on department letterhead) confirming the continuation of your program during your absence, your mailing address during your absence, and the date of your expected return. You must maintain health insurance at all time, even while outside the U.S.

If your return date changes, notify the International Programs Office immediately ipo@nmu.edu.

Changing visa status

I wish to obtain _____ visa status.

If you are applying for a new visa stamp outside of the U.S.: Date of departure: ____/____/____

If you are submitting I-539 application to change visa status inside the U.S.:

Date of application ____/____/____ OR Date of approval: ____/____/____

Keep your DS-2019(s) in a safe place! International Program cannot give copies of your documents. If you wish to return to the U.S. in the future, you may need to provide copies of your DS-2019(s). Never throw away these crucial documents!

Signature: _____ Date ____/____/____