

Submit this form in person to an ISSS Advisor
BEFORE withdrawing from classes

International Student Services
Room 2 Strong Hall
During Walk in Hours:
1:30-4:00pm Monday-Friday

AUTHORIZED EARLY WITHDRAWAL REQUEST

F-1 Students Withdrawing From or Leaving KU Before Finishing Program/Degree

Name: _____
Family/Surname Given Name

KUID: _____

Date I will withdraw from my classes or program: ____/____/____
Month Day Year

Note: An F-1 student who has obtained authorization from a DSO (international student advisor) **prior** to withdrawing from classes will be allowed a 15-day grace period for departure from the U.S. A student who terminates his or her course of study or withdraws from classes without prior DSO approval has violated his/her status and is not eligible for any grace period for departure.

Forwarding Address:

Non-KU Email address: _____

I understand:

- It is my responsibility to complete all necessary steps to withdraw from my classes through the Registrar's office.
- My SEVIS record shall be terminated based on the date of withdrawal that I have indicated above.
- I cannot work on campus once I withdraw from my classes or program.
- In order to return to the U.S. and resume study at KU, I will need to apply for readmission, obtain a new SEVIS I-20 and repay the SEVIS fee to the U.S. government.

Signature: _____

Date: _____

For Office Use Only

DSO Signature _____ Date approved _____

Date AEW entered in SEVIS: _____