

International Programs 25800 Carlos Bee Blvd, SF 102 Hayward, CA 94542 Phone: 510 885 2880 Fax 510 885 2787

# I-20 Travel Endorsement Request Form

Please complete and return this form to either <u>CIE@csueastbay.edu</u> or <u>globalacademy@csueastbay.edu</u> depending on your program. Processing time is generally 3-5 business days.

### **Student Information**

Family/Last Name:				First Name:			
NETID:				SEVIS Number: N			
US Address (# Street, Apt, City, State, Zip)							
Program:	Master's	Bachelor's	Global A	cademy	OPT/STEM- Expiration Date-		
Major:				Phone:			
Email:				@horizon.csueastbay.edu			
Visa Expiration Date:				Passport Expiration Date:			

#### Request Information- select all that apply

Endorsement for Travel: endorsement recommended every 6 months. Required every 6 months for OPT/STEM					
Renew F-1 Visa	Update Major	Lost or Stolen			

**Dependent Information-** if you have dependents who are traveling, you must request a travel endorsement on their I-20's. Complete the name of your dependents who are traveling below.

Dependent Name:	Dependent Name:
Dependent Name:	Dependent Name:

# **Travel Information**

Visa Revocation: I acknowledge that I am aware that law enforcement officials notify the U.S. Department of State in the event that<br/>an international student is arrested for driving under the influence (DUI), driving while intoxicated (DWI), or a criminal charge. The<br/>U.S. Department of State will then revoke the visa of the F-1 student who was reported, meaning the F-1 visa will no longer be valid<br/>for entry into the USA. I understand it is in my best interest to inform an international student advisor about any arrests before<br/>traveling outside the country.Departure Date:Return Date:Traveling to:Purpose of Travel:

#### **Acknowledgment and Signature**

I certify that I have read the above information and the information I have supplied is accurate.				
Student Signature:	Date:			

# YOUR TRAVEL I-20 WILL BE ELECTRONICALLY SIGNED AND EMAILED TO YOU