

## **J-1 DEPARTURE FORM**

This form allows the Warfel Center for International Programs and Services (IPS) to maintain or end you J-1 SEVIS record because you are leaving						
Millersville University (MU) temporarily or permanently.  Be aware that it may be necessary to cancel your international student health insurance. Please allow one week for processing.						
First Name, Middle Initial		Last Name			MU Email	
Date of Birth	Gender  □ Female □	Male	Nr. of J-2 dependents	Telephone		Student ID Number
Current Address						
IMPORTANT NOTES. PLEASE READ.						
<ul> <li>Do not submit this form if you are leaving Millersville University and the U.S. for summer vacation (May – August) but will return and enroll in the Fall term.</li> <li>Attach a copy of your most recent DS-2019 and a copy of your most recent I-94.</li> <li>Before submitting this request, update your permanent (out of U.S.) and current (U.S.) address with a Warfel Center for International Programs and Services and on MAX.</li> <li>You may need to meet with a Warfel Center for International Programs and Services Advisor to submit this form.</li> </ul>						
CHECK THE BOX THAT APPLIES TO YOU						
CHECK THE BOX THAT APPLIES TO YOU    I am leaving the U.S. for an academic term and will not be registered at the Millersville University. I intend to return to the Millersville University.    Departure date:						
READ THE STATEMENT BELOW AND SIGN						
<ul> <li>I certify that I have read the request form in full, and to the best of my knowledge, the information I have provided is accurate.</li> <li>I authorize the Warfel Center for International Programs and Services to take the SEVIS action I requested above.</li> <li>I understand that this form must be completed in DocuSign or physically submit it myself with a wet signature.</li> </ul>						
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