

WITHDRAWAL OR LEAVE OF ABSENCE REQUEST

- Federal regulations required the University of West Georgia to update the SEVIS record of any F-1 or J-1 student following a withdrawal or leave of absence prior to a student's expected graduation date.
- Students who wish to return home or leave the country for a period of time (excluding summer semester) must fill out this form and send it to the ISAP office.
- The ISAP office will give a recommendation of what to do with SEVIS records when you turn in this form.
- If this withdraw if for a medical reason in which you are staying in the USA, please use the Reduced Enrollment: Medical Condition form.
- Do not drop your classes until this form has been approved by the ISAP office. If you do so, we have to initiative an unauthorized withdrawal in the system.

STEPS FOR THE STUDENT:

Step 1: Contact your academic advisor, department chair, or professor who may make a recommendation if you are eligible to return to your studies for your situation. If the advisor agrees to recommend reduced course load, fill out sections 1, 2, and 3. Have your advisor fill out section 4 of this form.

Step 2: Contact the ISAP office who will review the recommendation and decide if there is enough evidence to approve your withdrawal or leave of absence. We will also review your options with you to choose the best one.

Step 3: After the ISAP office approves the withdrawal, you can drop your classes. You must also leave the country.

SECTION 1: STUDENT INFORMATION

Student's Family Name (Last Name)			
Student's Given Name (First Name)			
Date of Birth		UWG Student ID	
Phone Number		SEVIS ID Number	
Email Address			
Current Visa Status	F-1 Student	J-1 Student	Other Visa Type: Specify _____

SECTION 2: PROGRAM COMPLETION

Level of Study	Bachelors	Masters	PhD	Certificate
First Semester of Enrollment at UWG	<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer YEAR: _____	Semester(s) of Withdrawal or leave of Absence		<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer YEAR: _____
Current I-20 Program End Date				

SECTION 3: WITHDRAWAL OR LEAVE OF ABSENCE

Reason for Withdrawal or Leave of Absence			
Date of Withdrawal from UWG		Date of US Departure	
Are you planning to return to UWG?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNSURE	Expected date of Return to UWG	

Statement of Understanding

<i>I understand that I should not withdraw from classes or drop below full time enrollment before I meet with the ISAP office. I also understand that once my I-20 is terminated, I must leave the USA.</i>			
Student's Signature		Date	

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Summary of the Regulation

- International students who are in the US in F-1 or J-1 status are required by law to pursue a full course of study every semester of the academic year (Fall and Spring semester and Summer if it is the student's first or last term of study).
- "Full-time student status" is 12 credit hours for undergraduates and 9 credit hours for graduates, as defined in the UWG Course Catalogues
- The United States Citizenship and Immigration Services (USCIS) limits the reasons for a student to engage in less than full-time enrollment to the ones listed on this form. Failure to comply with this law results in the student's SEVIS record being terminated.
- Students can only use this option if the student plans to leave the country during their withdrawal from classes.

STEPS FOR THE ADVISOR/DEAN:

Step 1: Meet with the student about their course of study and make a decision on whether or not you feel the student's would be able to return to the UWG Academic Program they are enrolled in after their absence.

Step 2: If you feel the student's curriculum can be continued after the absence, please fill out the portion below. Students should submit the completed form to the ISAP office.

Step 3: After the ISAP office approves the reduced course load form, the student may withdraw from their classes, but they must also leave the country.

SECTION 4: ACADEMIC ADVISOR OR DEAN RECOMMENDATION

I am aware of the circumstances above, have reviewed the educational implications, and certify that the student would be eligible to return to UWG after the absence requested above.

Advisor's Signature		Date	
Printed Name			
Title			
Email		Extension	