



**F-1 Student Unauthorized Termination Form (to be completed by DSO)**

Student's name \_\_\_\_\_  
(First name) (Last name)

Academic Program of Study \_\_\_\_\_

Date student was notified of termination \_\_\_\_\_ via (circle one) E-mail Phone In Person

The above named student's SEVIS record is being terminated because of:

- \_\_\_\_\_ Unauthorized employment
- \_\_\_\_\_ Unauthorized withdrawal from classes
- \_\_\_\_\_ Unauthorized drop below full course of study
- \_\_\_\_\_ Expulsion and suspension
- \_\_\_\_\_ Failure to enroll in classes
- \_\_\_\_\_ Academic dismissal
- \_\_\_\_\_ Absence from country for five months or longer (do NOT use on student who is currently in the U.S.)
- \_\_\_\_\_ Authorized withdrawal from courses (reasons include family emergency, medical emergency, etc.)
- \_\_\_\_\_ Other (please explain on reverse of form)

Date student's record was terminated \_\_\_\_\_

\_\_\_\_\_  
(Signature of Student) (Printed Name and Title) (Date)

\_\_\_\_\_  
(Signature of DSO) (Printed Name and Title) (Date)

\*\*If student is unavailable to sign document, it can be completed without student signature. However, send the student an electronic copy of the form once completed by DSO.