

## **J1 Scholar Departure Form**

Name:				Student/	Student/ A		
	Last/Family	First	Middle	Faculty ID:			
Home Country							
Address:	Number/Street			_ Birth Date:			
	Number/Street			0	,	eai	
	City Province/Territory		Home Country Phone:				
	Postal Code		Country	_			
Email:				Local Pho	Local Phone:		
Date of d	leparture <u>:</u>						
Reason							
Do you in							
If so, v	what dates do you inte	nd to return?					
			to this program?_				
	Number/Street    City   Province/Territory   Birth Date:						
Do you i	ntend to return to US	U to work on and	other program?				
Scho	olar Signature	Dat			lvisor Signature D	ate	

## For J-1 Exchange Visitors to Review with Advisors

- Keep documents issued
- ∘ 212(e) Home Residency Rule
- ∘ 24-month bar on repeat participation for professor/Research programs
  - Foreign Affairs Manual also restricts return in short-term category
- 12-month bar on professor/Research programs after previous J participation

Email scholar link for departure survey: https://usu.co1.qualtrics.com/SE/?SID=SV\_3kEgMQh3TlxotF3