



ROUKEMA CENTER FOR INTERNATIONAL EDUCATION

505 Ramapo Valley Road, ASB 123, Mahwah, NJ 07430-1680

Phone (201) 684-7567 Fax (201) 684-7989

www.ramapo.edu/international

J-1 VISITING SCHOLAR NOTICE OF DEPARTURE

Last Name: _____ First Name: _____

SEVIS ID: _____ Phone No: _____ Email: _____

FUTURE PLANS:

_____ **Departing with no immediate plans to return**

If you are in the RESEARCH SCHOLAR or PROFESSOR category, you will not be able to begin a new program in the Research Scholar or Professor category for the next two years.

Date of departure from Ramapo College: _____

Date of departure from the US: _____

_____ **Departing the US for one year or less**

Date of departure from the US: _____ Date of return to the US: _____

IMPORTANT: If you decide to return to the US please submit this form along with a letter from your department confirming the continuation of your program and the date of your expected return.

If you are transferring to another institution or decide to change your visa status you must contact International Students and Scholars Office before doing so.

Signature: _____

Date: _____