

CENTER FOR INTERNATIONAL AFFAIRS,

IMMIGRATION, AND STUDY ABROAD

**STUDENT RESPONSIBILITIES IN MAINTAINING F-1 STATUS**

* I must carry a full course of study (at least 12 credits every Fall and Spring

semester). Winter and Summer are not part of Spring or Fall semesters.

Remedial credits will count towards the 12-credit total required by USCIS. \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

* I must notify the Director of International Affairs of my intention to withdraw

from/drop any of my classes.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

* I must notify the Director of International Affairs if I stop going to any of my

classes for any reason, including medical reasons\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

* I must notify the Director of International Affairs of any change of address or

contact information within 10 days\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

* I must maintain a minimum overall GPA of 2.0\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_
* I may not work off-campus without authorization from the Director of International Affairs \_\_\_\_\_\_\_\_\_
* I must obtain the signature of the Director of International Affairs on my I-20

before traveling outside the United States\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

* I must attend international student workshops and my ST-100 class to get

information about immigration laws and school requirements\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

* I must renew my passport and extend my I-20 at least 30 days before expiration\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_
* I understand that any violation of any USCIS law might result in the termination

of my I-20 and I will require reinstatement.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Name Student Signature Date DSO Signature