



TRAVEL AUTHORIZATION REQUEST FORM

Last Name: _____ **First Name:** _____
(as it appears on passport) (as it appears on passport)

UCLA ID#: _____ **SEVIS ID#:** N _____

Country of Birth: _____ **Country of Citizenship:** _____

Major: _____ **Date of Birth:** _____
Month Day Year

E-Mail: _____ **Telephone #:** _____

TRAVEL INFORMATION

Estimated Departure Date: _____ **Estimated Return Date:** _____
(Month Day Year) (Month Day Year)

- Is your F-1 visa (in your passport) expired or will it expire before your re-entry to the U.S.? Yes No
 - If **yes**, please see below for re-entry procedures and requirements.
- Are you currently engaging in Post-Completion OPT or the STEM OPT Extension? Yes No
 - If **yes**, please complete the following additional requirements:
 - Submit a copy of your Employment Authorization Document (EAD)
 - Ensure that your employment, U.S. address, and telephone information are up-to-date in your [SEVP Portal account](#).

I certify that I have reviewed the [Travel Authorization section](#) on the Dashew Center website and understand that it is my responsibility to have the required re-entry documents at a U.S. port of entry to re-enter the U.S. in valid F-1 status. If my F-1 visa has expired or will expire before my re-entry to the U.S., I understand that I am required to apply for a new F-1 visa at a U.S. Embassy or Consulate overseas and will review the F-1 visa application procedures on the U.S. Department of State [website](#).

Student's Signature: _____ **Date:** _____

FOR DCISS USE ONLY	INIT: _____ DATE: _____		
<input type="checkbox"/> OPT Audit <input type="checkbox"/> EAD	<input type="checkbox"/> Restriction Holds <input type="checkbox"/> Current Enrollment <input type="checkbox"/> Past Enrollment	<input type="checkbox"/> Update I-20	