



**Instructions for Taking a Non-Medical Leave of Absence:**

1. Make an appointment with an Office of Global Services (OGS) advisor to discuss how the leave will impact your SEVIS status and future eligibility for SEVIS benefits, such as co-op, Optional Practical Training (OPT), etc. **before you stop attending classes or before you stop working on your Co-op job or before the term when your leave will begin.**
2. Make official arrangements for taking a leave of absence with your academic advisor at your college (for undergraduate students and all College of Professional Studies students, including the College of Professional School graduate students) or your graduate school office (for graduate students).
3. Bring this form to the Office of Global Services after your advisor/graduate school has signed it. Make an appointment with an OGS advisor if you still have questions or any changes in your situation that you did not discuss in your initial appointment regarding your leave of absence.
4. The OGS will terminate your SEVIS record for authorized early withdrawal if you have maintained your F-1 visa status up to the point of your leave of absence and if you have requested the leave prior to when you stop attending classes or working on your Co-op job.
5. You must depart from the U.S. within 15 days of your last attendance in class or last day at your Co-op job as required by U.S. federal government regulations.

**Instructions for Returning from a Non-Medical Leave of Absence of Less than 5 Months Absence from the U.S.\*:**

1. Scan and email or fax your completed *Request for Return from a Non-Medical Leave of Absence Form* to the Office of Global Services (OGS) **approximately 70 days prior to the start date of the academic term in which you plan to return.** Documents can be submitted via email to Laurie Larocque at [l.larocque@northeastern.edu](mailto:l.larocque@northeastern.edu) or fax to 617.373.8788.
2. U.S. Federal Government regulations state that you can return to the U.S. no earlier than 30 days prior to the start date of the academic term in which you will be resuming your studies. The OGS will request that SEVIS change your SEVIS record status from *terminated* to *active*. U.S. federal government regulations allow for the OGS to request reactivation to active status no earlier than 60 days prior to the start of your academic term. So it is in your best interest to provide the OGS with this form 70 days prior to your planned resumption of classes so that the OGS will be ready to submit this request as early as allowed.
3. Once SEVIS has reactivated your SEVIS record, the Office of Global Services will notify you via email so that you will know that you are eligible for re-entry to the U.S. or to apply for a new visa if needed.
4. Please remember that SEVIS decides whether or not to reactivate your SEVIS record after the OGS has requested reactivation. If for any reason SEVIS decides that you are ineligible for reactivation of your SEVIS record, or if SEVIS does not reactivate your SEVIS record in sufficient time for you to re-enter the U.S. (or obtain a new F-1 visa if your visa has expired) to resume your studies in the selected academic term, you may need to postpone your re-entry to the U.S. to the next appropriate academic term. In this case, you will need to re-enter the U.S. using a new initial I-20, which you will need to request from the OGS at least a few months prior to your new planned return date.

*\*May include summer vacation time occurring directly prior to the leave of absence, but not to exceed a total of 8 months outside of the U.S.*



**Instructions for Returning from a Non-Medical Leave of Absence of More than 5 Months Absence from the U.S.:**

1. At least a few months prior to your planned return to class fill out the online *I-20 or DS-2019 Request Form for Return from a Leave of Absence of 5 Months or more* available [www.northeastern.edu/ogs](http://www.northeastern.edu/ogs) under Forms & Guides and then under Current Students. Instructions on documents to upload are included within the form. If someone else is providing the financial documentation, they should write a short letter stating their relationship to you
2. The OGS will issue and mail your new initial I-20 (it will have a new SEVIS Number)
3. Upon receipt of the new initial I-20, you will need to pay the SEVIS fee (we will mail instructions with your I-20).
4. Then you may need to apply for and obtain a new F-1 visa stamp. To obtain the most up-to-date information regarding whether or not you will need a new visa if your current F-1 visa is still valid and indicates “Northeastern University” as your school, is to contact the U.S. embassy or consulate where you will apply for the visa if necessary needed.
5. You may not return to the U.S. earlier than 30 days prior to the start date of your academic term since you are returning with a new initial I-20.
6. A few weeks prior to the start of the academic term, the OGS will email you a link to our online check in form. Please complete this form.
7. Please note that returning to the U.S. with an initial I-20 may impact your eligibility for co-op (Curricular Practical Training) or OPT (Optional Practical Training).



**Part I: To be completed by the student**

Name: \_\_\_\_\_  
Last/Family Name First/Given Name Middle Name

Northeastern ID: \_\_\_\_\_ Degree/Major: \_\_\_\_\_

Leave of Absence requested for:

- Fall Semester/Quarter 20\_\_       Winter Quarter (CPS only) 20\_\_  
 Spring Semester/Quarter 20\_\_       Summer Semester/Quarter 20\_\_

Dates for Leave of Absence: From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Date Year Month Date Year

Travel Information:

Date of departure from the U.S.: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Date Year

Expected return date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Date Year

**Contact information while on leave of absence:**

Address: \_\_\_\_\_  
 \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact in the U.S.: \_\_\_\_\_  
Phone Number Name Email

*I certify that I am aware that my current SEVIS record will be terminated and that in order to return to the U.S. to resume my studies, I must follow the attached instructions. The process for obtaining a new initial I-20 or reactivation of my SEVIS status should be initiated by me by contacting the OGS as outlined in the instructions prior to my expected return date or visa interview appointment if my current F-1 visa stamp will be expired at the time of my planned re-entry to the U.S. Additionally, I understand that I must remain outside of the U.S. for the duration of my leave of absence and that in accordance with U.S. government regulations I may not return to the U.S. earlier than 30 days prior to the start date of my next academic term. Furthermore, I understand that this form is solely for the purpose of notifying the OGS of my leave of absence for SEVIS purposes. In order to be considered on an official leave of absence by the university, I must complete any additional forms required by my college/graduate school and by the Office of the Registrar. I should consult with my college/graduate school to ensure that I have completed all required forms for the university to officially record my leave of absence. Additionally, I understand that there is no guarantee that my SEVIS record will be reactivated by SEVIS or that I will be able to obtain a new F-1 visa if I am issued an initial I-20 and need a new visa for my return.*

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Part II: To be completed by the Academic Advisor (for undergraduate day or SEVIS contact for graduate and CPS)**

I certify that the above named student has been approved for a leave of absence for the \_\_\_ FL \_\_\_ WN \_\_\_ SP \_\_\_ SM term 20\_\_\_ and that the student is academically eligible to resume studies for the \_\_\_ Fall/Semester/Quarter \_\_\_ Winter Quarter (CPS only) \_\_\_ Spring Semester/Quarter \_\_\_ Summer Semester/Quarter 20\_\_\_.

The last day of class (including final exams) or Co-op attended by this student was: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Date Year

Signature of Academic Advisor or SEVIS Contact: \_\_\_\_\_

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_