A World of Cultures United in Learning

OHLONE COLLEGE

International Programs and Services

International Travel Form

Name: _____
Family (last) name Given (first) name Other

Ohlone Student ID#:_____

Date of Birth:_____
Month Day Year

Telephone Number:_____ E-mail Address:_____

Date you intend to leave the U.S._____

Date you intend to return to the U.S._____

In order to return to the U.S. after international travel, you must have a recent signature by a Designated School Official on the 3rd page of your I-20. Before a DSO signs the 3rd page of your I-20 you need to bring the following with this completed form to the International Programs and Services office:

- **Passport**
- **I-20**

_____ _____
Student Signature Date

Please note: You cannot be out of the U.S. for longer than 5 months and return on the same I-20.

For Internal Use Only

Balance Paid_____ Checklist Complete_____ No Holds_____ Enrolled (12 units)_____

_____ _____
Signature of International Programs and Services Staff Date