



International Student Center

TRAVEL SIGNATURE REQUEST

FOR STUDENT TO COMPLETE: Please type or print clearly	
Last Name:	First Name:
PCC ID#:	SEVIS ID#: N00
Date of Birth:	Cell Phone #:
Program end date on I-20 (MM/DD/YY):	Passport Expiration Date (MM/DD/YY):
U.S. Address:	
PCC Email Address:	@go.pasadena.edu

Departure Date from U.S (MM/DD/YY):	Re-entry Date to U.S. (MM/DD/YY):
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- Attach your Original Form I-20
- Attach the Change of U.S. Address Form (**only if you have moved**)
- Complete this part if you are traveling for emergency **during classes in the Fall or Spring semester. All your instructor(s) must sign below:**

The above student is currently registered in my class and has agreed to complete all assignments missed during his/her time of travel. I agree not to drop him/her from my course during this time. Attach additional pages if needed:

Course Title/CRN#	Instructor's Name	Instructor's Signature

NOTE: If you requested a transfer-out, do not submit this form. Please contact your new school for the travel I-20.

I understand I must have a **valid F-1 visa, a passport valid for at least six months, and my original Form I-20 signed for travel** in order to travel outside of the U.S. PCC and the International Student Center are not responsible should I be denied entry to the U.S. Should I be denied entry, I understand that I must notify the PCC International Student Center and am responsible for any fees or dropping classes, if needed.

I state that the information I am providing on this form is true. I further understand that it is a violation of United States law to give false information to Pasadena City College.

Student's Signature:	Date (MM/DD/YY):
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For office use only:						
Initials _____	Date _____	Units _____	SEVIS _____	Request Log _____	SARS _____	Email _____