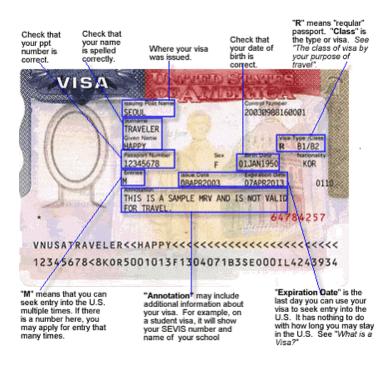
#### **1.** Review your passport expiration date.

- a. You should renew your passport if it has less than six months until expiration.
- b. If you are on an H-1B, beware that if your passport expires prior to the end date of your H-1B end date, your I-94, which controls your legal presence in the U.S., will be shortened to your passport end date when you travel back into the U.S. – contact the OIS if this is the case.

#### 2. Review your visa stamp.

- a. Do you have a visa stamp for your current status classification?
- b. What is the expiration date? (Must be valid on your date of re-entry (except when traveling pursuant to <u>Automatic Visa Revalidation</u>)
- c. How many entries were you granted? (Most will show "M" for multiple entries, but you should double check before you travel).



## 3. Review your visa document

### a. F-1, I-20

- i. Enrolled in study? Travel signature is valid one year
- ii. On post-completion or STEM OPT? Travel signature is valid six months

# This is page two (the back page) of your I-20, the highlighted area is where you need the travel signature from the OIS.

| Department of Homeland<br>U.S. Immigration and Custo                       |                      | I-20, Certifica<br>OMB NO. 165        | 0 /                         | nimmigrant Student Status |
|--|----------------------|---------------------------------------|-----------------------------|---------------------------|
| SEVIS ID: N00047<br>EMPLOYMENT AUTHO                                       |                      | NAME:                                 | John Doe Smi                | ith                       |
| EMPLOYMENT STATUS  |                      | TYPE                                  |                             |                           |
| EMPLOYMENT START DATE  | 2                    | EMPLOYMEN                             | T END DATE                  |                           |
| EMPLOYER NAME  |                      | EMPLOYER L                            | OCATION                     |                           |
| COMMENTS   |                      |                                       |                             |                           |
| CHANGE OF STATUS/C   | AP-GAP EXTENSION     |                                       |                             |                           |
| REQUESTED VISA TYPE  | REQUEST/PETITION ST. | ATUS RECEIPT NUMBER                   | BENEFIT ST                  | ART DATE/REQUEST DATE     |
| EVENT HISTORY  |                      |                                       |                             |                           |
| EVENT NAME   |                      | EVENT DATE                            |                             |                           |
| OTHER AUTHORIZATI  | ONS                  |                                       |                             |                           |
| AUTHORIZATION  |                      | START DATE                            | END D                       | DATE                      |
| TRAVEL ENDORSEMEN  | NT                   |                                       |                             |                           |
| This page when properly endorsed<br>certification signature is valid for o |                      | student to attend the same school aft | er a temporary absence from | the United States. Each   |
| SCHOOL OFFICIAL  | TITLE                | SIGNATURE                             | DATE ISSUED                 | PLACE ISSUED              |
|  |                      | x                                     |                             |                           |
|  |                      |                                       |                             |                           |

#### b. J-1, DS-2019

i. Travel signature is valid one year

#### The highlighted area is where you get a travel signature from the OIS

|   |  |  | DRAF  | Т   |  |  |   |
|---|--|--|---|---|--|--|---|
| Family Name:  |  | First Name:<br>Johan   |   | Middle Name:  | Ger  | nder:<br>MALE  | N0001234567   |
| ate of Birth(mm-dd-yyyy):<br>08-08-1988   | City of Birth:<br>Lodz   | Country of Bir   | POLAND  | Citizenship Country Code:<br>PL<br>ode: Position:                                   | Citizenship Country:<br>POLAND                   |  | J-1   |
| egal Permanent Residence Cou<br>PL<br>rimary Site of Activity: 123<br>Anyr  | POLAND   |  | Position Co<br>215                            | UNIVERSITY U  | INDERGRADUATE STUDE                              | INTS   |   |
| . Program Sponsor:<br>InterExchange, Inc<br>articipating Program Official I<br>SUMMER TRAVEL/WOF  | Description:   |  |   |   | Exchange Visitor Program Nu<br>P-1-0000          | mber:  |   |
|   |  | accompanied b  | y number (0) «                                | of immediate family   | y members.                                       |  |   |
| . Form Covers Period:   |  | 4. Exchange Visitor G  | Category:                                     |   | •  |  |   |
| rom (mm-dd-yyyy): 06-01   | -2016  | SUMMER TRA<br>Subject/Field Code:  | VEL/WORK<br>Subject/Field Code                |   |  |  |   |
| o (mm-dd-yyyy): 09-30   | -2016  | 1234   | Labor   | Kemarks:  |  |  |   |
| During the period covered by  | this form, the total estimate                                    | d financial support (in  | U.S. \$) is to be provided t                  | o the exchange visitor by:  |  |  |   |
| US. BEPARTMENT OF STATE / DIE USE OR CHETTICATION BY<br>RESPONSIBLE OFFICER OR ALTERNATION ELO FOTCER<br>THAT A NOTHECATION COPY OF THIS FORM HAS BEEN PROVIDED<br>TO THE US. DEPARTMENT OF STATE (INCLUDE DATE). |  | Nume of Official Pepparing Form<br>InterExchange, 100 Well St<br>New York, NY 10005<br>Address of Responsible Officer or Alternate Responsible Officer |   |   | Officer<br>2                                     | Title<br>12–924–0446<br>Telephone Number<br>01–13–2016 |   |
| Statement of Responsible Off<br>Effective date( <i>mm-dd-yyyy</i> ):<br>to the program specified in iten  | ficer for Releasing Sponsor (<br>n 2 is necessary or highly desi | FOR TRANSFER OF P.<br>. Transfer of this excl<br>rable and is in conformity  | ROGRAM  | of Responsible Officer or Alternate<br>number<br>Mutual Educational and Cultural Es |  |  | Date (mm-dd-yyyy)                                       |
| Signature of Res  | sponsible Officer or Alternate                                   | Responsible Officer  |   |   | Di   | ate(mm-dd-yyyy) o                                      | f Signature   |
| RELIMINARY ENDORSEME<br>MIGRATION AND NATION<br>the Exchange Visitor in the above   | NALITY ACT AND PL 94-4   | MMIGRATION OFFIC<br>184, AS AMENDED (8   | ER REGARDING SECT<br>ee item I(a) of page 2). | ION 212(e) OF THE   | (Maximu  | m validation perio                                     |   |
|   | <ul> <li>year residence requirement.</li> </ul>                  |  |   |   | Scholars and 4 months for                        | Camp Counselors  | p to 6 months for Short-term<br>and Summer Work/Travel. |
| _   | esidence requirement based or                                    | PH   | YSICIANS SPONSORED                            | TS G-2-00263 AND ALL ALIEN<br>BY P-3-04510 ARE SUBJECT TO<br>ESIDENCE REQUIREMENT ) | <ol> <li>Exchange Visitor is in</li> </ol>       | good standing at th                                    | he present time   |
|   | financing and/or   |  |   |   |  | Date (nun-dd-)   |   |
| <ul> <li>B. The Exchange</li> <li>C. PL 94-484 as</li> </ul>  | e Visitor Skills List and/or                                     |  |   |   |  |  |   |
| C. C. 24-404 as   | - university   |  |   |   | Signature of Respo<br>(2) Exchange Visitor is in |  | Iternate Responsible Officer<br>he present time         |
|   |  |  |   |   |  |  |   |
|   | Name   |  |   | Title   |  | Date (mm-dd-)  |   |
|   | of Consular or Immigration                                       |  |   | Date (mm-dd-yyyy)   | Constant of C                                    |  |   |
| THE U.S. DEPARTME   | e of Consular or Immigration                                     | S THE RIGHT TO MA  |   |   | Signature of Respon                              |  | 9359)<br>ernate Responsible Officer                     |
| THE U.S. DEPARTME   | e of Consular or Immigration                                     | S THE RIGHT TO MA  |   | Date (mm-dd-yyyy)<br>ATION REGARDING 212 (e).                                       | Signature of Response                            |  |   |

#### c. **H-1B, I-797**

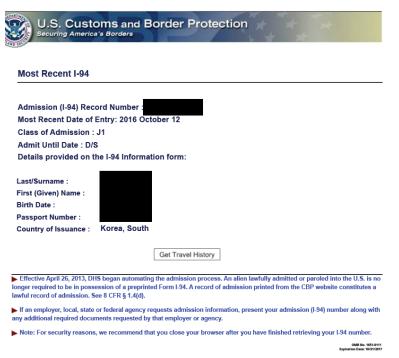
i. You may collect the full original from OIS before travel to facilitate visa renewal and re-entry

| RECEIPT NUMBER  | Contraction of the last  | CAME FORE 1129 PETITION FOR A MONIMPIGUART WORK   |
|---|--|---|
| ERC-11-209-   | PRIORITY DATE  | PETTIONER   |
| Suly 18, 2011   | Tala   | BINDRIMO  |
| March 9, 2012   | 1 of 2   | Notice Type: Approval Notice  |
|   |  | Sotios Type - system<br>Class: NJS<br>Valid from D3/D8/2012 to 09/38/2014<br>Consulate: KAMACRI   |
| the case out inform parts<br>and qualifies those with<br>residue approval does no<br>be during these. Note a<br>pathorized. Finese costs<br>if circumstantes dampt.<br>If any of the workers on | is authority and the primary of a sector for the primary of the pr | tion has fear and in the listed momentume. The may also and<br>margin the have the average. There are an entropy also and<br>the state and the second of the second term.<br>Training, then the average are framed frames approximation of<br>Himsel, all only at desired in the second the and the two partial<br>lists about the schedulet.<br>The desires all only at desires and the second the are partial<br>lists about the schedulet. |
| deferent estates for an<br>con be termin.<br>The approach of this visi<br>bidge bendfiltery with m<br>as antennam, theope, for<br>makes of estates) )<br>name                                   | a partition does not in Mr<br>apartition does not in Mr<br>adjustment of status.   | An and arbeally event the Univer States, and washingthered at<br>a satisfy this office on the allocated andiamignet, the bushese<br>and grant and herearting risting and ones not personness that the<br>allocate for event, for emerging to the United States, or for<br>States Doublisher / For<br>The Manual States and the States of States of States<br>States States ()   |
| Please see the additional<br>U.S. CITIERNANIE<br>VERMONT SERVICE<br>75 LOWER WELDEN   | anformations on the back. Y<br>4 THREGRATION SW<br>CENTER<br>STREET<br>10 05479-0001<br>• Telephone: (800)   | 375-5283  |
| Customer Service  |  | Please large eff particle before and large of it to the allow workin<br>standard abroad, or if no vice in required, where applying for administence to the U.S.   |
| Customer Service<br>Form 1797B (Rev. 10/31/   | publicanty him is what at an Administrativ   | Type) 1129  |

#### 4. Always look-up your I-94 upon return.

- a. Your <u>I-94 admission record in CBP's electronic system</u> is the official document that controls your immigration status and length of stay in the U.S. always check it when you return to ensure your immigration status is correct (i.e. F-1, J-1, H-1B) and the "admit until date" is accurate. Contact OIS if incorrect.
- Note, all individuals in F-1 and J-1 status should have "D/S" as the "admit until date".
   D/S means duration of status and refers to the end date on your I-20 or DS-2019 and any applicable grace period.
- c. H-1Bs beware! If your passport expires prior to the end date of your H-1B end date, your I-94, which controls your legal presence in the U.S., will be shortened to your passport end date when you travel back into the U.S. contact the OIS if this is the case. Also, you may notice your I-94 "admit until date" is 10 days longer than your H-1B expiration date; this is a discretionary grace period, you may not work during that time.

#### Sample I-94



For inquiries or questions regarding your I-94, please click here

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