



**FORM MUST BE TYPED!!!!**

## International Center for Students and Scholars

### OPT Travel Signature Request Form

**Reminder: It takes at least two weeks for Travel Signatures to be processed so please plan ahead**

Last name \_\_\_\_\_ First name \_\_\_\_\_

UB ID \_\_\_\_\_ Phone number \_\_\_\_\_

Major \_\_\_\_\_ OPT end date \_\_\_\_\_

Passport expiration date \_\_\_\_\_ Visa expiration date \_\_\_\_\_

#### U.S. Address:

(Street) \_\_\_\_\_ (Apt #) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip code) \_\_\_\_\_

#### Traveling information

Date leaving \_\_\_\_\_ Date returning \_\_\_\_\_

#### Address you are traveling to:

(Street) \_\_\_\_\_ (Apt #) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip code) \_\_\_\_\_

Country \_\_\_\_\_ Phone number \_\_\_\_\_

With my signature below, I confirm that I understand the risks involved in traveling while I am on OPT. I also understand that if I travel outside the U.S. for 5 months or more it will lead to a violation of my F-1 status and cancellation of my OPT. Each time I return from a trip outside the U.S., I will scan/email my most recent entry stamp to [opt@bridgeport.edu](mailto:opt@bridgeport.edu) It is my responsibility to check my I-94 record at [www.cbp.gov/I94](http://www.cbp.gov/I94) to make sure my status and entry date are correct. I also authorize International Center for Students and Scholars staff permission to access my electronic I-94 record to verify my return to the United States.

Student signature \_\_\_\_\_ Date \_\_\_\_\_

#### For Office Use Only

Holds \_\_\_\_\_ SASM \_\_\_\_\_ Balance \_\_\_\_\_

STEM Application pending? \_\_\_\_\_ Cap gap? \_\_\_\_\_