

ACADEMIC REPORT/SUMMER DEPARTURE FORM

Name _____ Academic Institution _____
 Home Country _____ Field of Study _____
 Date of Arrival In the U.S. _____

ACADEMIC REPORT

List courses taken during the past and current term. If academic program included other activities (such as dissertation research, etc), describe fully below.

	<u>Title of Course</u>	<u>Credits/Hours</u>	<u>Grade</u>
Fall/Winter:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Spring:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Indicate the degree or certificate, if any, that you will obtain upon completion of this program in the United States. Provide the date all academic work will be completed.

NOTE: If you are a **non-degree** student or **Visiting Researcher**, please indicate "N/A" where it asks for degree and indicate the date all of your academic work will be completed in the United States.

_____ Degree/Certificate _____ Month/Day/Year

ENDORSEMENT OF ACADEMIC ADVISOR

I certify that the foregoing information concerning the academic program is correct and that this grantee's performance has been satisfactory in all respects. (If unable to certify, please explain, attaching a separate sheet.)

_____ Name _____ Signature _____
 _____ Date _____ Title _____ E-mail _____ Phone Number _____

SUMMER PLANS

If you plan to remain in the U.S. for any portion of the summer, please describe your proposed activities and your means of financial support (attached additional sheets if needed). **NOTE:** *you must provide support documents such as a bank statement, copies of university awards and/or scholarship letters verifying the funding you list.*

Summer Contact Information (if different from academic year) effective from ____/____/____ to ____/____/____

U.S. Address _____ Phone Number _____

_____ Apt # _____ E-Mail _____

City _____

State _____ Zip _____

DEPARTURE PLANS

Expected Date of Departure: ____/____/____

Remember: According to Federal J Visa regulations you may remain in the U.S. for a maximum of 30 days after completing your approved student activities. During this 30-day grace period you are not permitted to pursue academic studies or any type of employment.

Name of airline or other means of transportation: _____

U.S. city from which you will depart: _____

Return ravel paid by (indicate whether travel grant, personal funds, etc): _____

Permanent contact information in your home country:

Address _____ E-Mail _____

_____ Phone number _____

Country _____

Signature of Student

Date

Please be sure to notify your IIE Regional Center contact if your date of departure changes from that indicated above.

Before leaving the U.S. you should complete a Final Report (which is located on the IIE Website:

www.iie.org/fulbright/non-us/current under “Forms and Administration”) and mail it to your IIE Regional Center contact.

FOR IIE USE ONLY

IIE Reviewer _____ Date _____