

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 Security
U.S. Immigration and Customs Enforcement

I-20, Certificate of Eligibility for Nonimmigrant Student Status
OMB NO. 1653-0038

SEVIS ID: N0004705512 (F-1)

NAME: John Doe Smith

EMPLOYMENT AUTHORIZATION

| | |
|-----------------------|---------------------|
| EMPLOYMENT STATUS | TYPE |
| EMPLOYMENT START DATE | EMPLOYMENT END DATE |
| EMPLOYER NAME | EMPLOYER LOCATION |
| COMMENTS | |

CHANGE OF STATUS/CAP-GAP EXTENSION

| | | | |
|---------------------|-------------------------|----------------|---------------------------------|
| REQUESTED VISA TYPE | REQUEST/PETITION STATUS | RECEIPT NUMBER | BENEFIT START DATE/REQUEST DATE |
|---------------------|-------------------------|----------------|---------------------------------|

EVENT HISTORY

| | |
|------------|------------|
| EVENT NAME | EVENT DATE |
|------------|------------|

OTHER AUTHORIZATIONS

| | | |
|---------------|------------|----------|
| AUTHORIZATION | START DATE | END DATE |
|---------------|------------|----------|

TRAVEL ENDORSEMENT

This page when properly endorsed, may be used for reentry of the student to attend the same school after a temporary absence from the United States. Each certification signature is valid for one year.

| SCHOOL OFFICIAL | TITLE | SIGNATURE | DATE ISSUED | PLACE ISSUED |
|-----------------|-------|-----------|-------------|--------------|
| | | X | | |
| | | X | | |
| | | X | | |
| | | 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

DRAFT



| | | | | | | | | | |
|---|--|--|-------|---------------------------------|--------------------------------|---|--|------------------------------------|--|
| 1. Family Name: Do | | First Name: Johan | | Middle Name: | | Gender: MALE | | N0001234567 | |
| Date of Birth (mm-dd-yyyy): 08-08-1988 | | City of Birth: Lodz | | Country of Birth: POLAND | | Citizenship Country Code: PL | | Citizenship Country: POLAND | |
| Legal Permanent Residence Country Code: PL | | Legal Permanent Residence Country: POLAND | | Position Code: 215 | | Position: UNIVERSITY UNDERGRADUATE STUDENTS | | J-1 | |
| Primary Site of Activity: 123 Main Street Anywhere, NY 10013 | | | | | | | | | |
| 2. Program Sponsor: InterExchange, Inc. | | | | | | Exchange Visitor Program Number: P-1-0000 | | | |
| Participating Program Official Description: SUMMER TRAVEL/WORK | | | | | | | | | |
| Purpose of this form: Begin new program; accompanied by number (0) of immediate family members. | | | | | | | | | |
| 3. Form Covers Period: | | | | 4. Exchange Visitor Category: | | | | | |
| From (mm-dd-yyyy): 06-01-2016 | | | | SUMMER TRAVEL/WORK | | | | | |
| To (mm-dd-yyyy): 09-30-2016 | | | | Subject/Field Code: 1234 | | Subject/Field Code Remarks: Labor | | | |
| 5. During the period covered by this form, the total estimated financial support (in U.S.\$) is to be provided to the exchange visitor by: | | | | | | | | | |
| 6. U.S. DEPARTMENT OF STATE / DHS USE OR CERTIFICATION BY RESPONSIBLE OFFICER OR ALTERNATE RESPONSIBLE OFFICER THAT A NOTIFICATION COPY OF THIS FORM HAS BEEN PROVIDED TO THE U.S. DEPARTMENT OF STATE. (INCLUDE DATE). | | | | | | 7. Alternate Responsible Officer | | | |
| | | | | | | Name of Official Preparing Form | | Title | |
| | | | | | | InterExchange, 100 Wall St New York, NY 10005 | | 212-924-0446 | |
| | | | | | | Address of Responsible Officer or Alternate Responsible Officer | | Telephone Number | |
| | | | | | | | | 01-13-2016 | |
| | | | | | | Signature of Responsible Officer or Alternate Responsible Officer | | Date (mm-dd-yyyy) | |
| 8. Statement of Responsible Officer for Releasing Sponsor (FOR TRANSFER OF PROGRAM) | | | | | | | | | |
| Effective date (mm-dd-yyyy): _____ Transfer of this exchange visitor from program number _____ sponsored by _____ to the program specified in item 2 is necessary or highly desirable and is in conformity with the objectives of the Mutual Educational and Cultural Exchange Act of 1961, as amended. | | | | | | | | | |
| Signature of Responsible Officer or Alternate Responsible Officer | | | | | Date (mm-dd-yyyy) of Signature | | | | |
| PRELIMINARY ENDORSEMENT OF CONSULAR OR IMMIGRATION OFFICER REGARDING SECTION 212(e) OF THE IMMIGRATION AND NATIONALITY ACT AND PL 94-484, AS AMENDED. (see item 1(a) of page 2). | | | | | | TRAVEL VALIDATION BY RESPONSIBLE OFFICER <i>(Maximum validation period is 1 year*)</i> *EXCEPT: Maximum validation period is up to 6 months for Short-term Scholars and 4 months for Camp Counselors and Summer Work/Travel. (1) Exchange Visitor is in good standing at the present time _____ Date (mm-dd-yyyy) _____ Signature of Responsible Officer or Alternate Responsible Officer (2) Exchange Visitor is in good standing at the present time _____ Date (mm-dd-yyyy) _____ Signature of Responsible Officer or Alternate Responsible Officer | | | |
| The Exchange Visitor in the above program: | | | | | | | | | |
| 1. <input type="checkbox"/> Not subject to the two-year residence requirement. | | | | | | | | | |
| 2. <input type="checkbox"/> Subject to two-year residence requirement based on: | | | | | | | | | |
| A. <input type="checkbox"/> Government financing and/or | | | | | | | | | |
| B. <input type="checkbox"/> The Exchange Visitor Skills List and/or | | | | | | | | | |
| C. <input type="checkbox"/> PL-94-484 as amended | | | | | | | | | |
| (ALL USAID PARTICIPANTS G-3-00263 AND ALL ALIEN PHYSICIANS SPONSORED BY P-3-04510 ARE SUBJECT TO THE TWO-YEAR HOME RESIDENCE REQUIREMENT) | | | | | | | | | |
| Name | | | Title | | | | | | |
| Signature of Consular or Immigration Officer | | | | | | Date (mm-dd-yyyy) | | | |
| THE U.S. DEPARTMENT OF STATE RESERVES THE RIGHT TO MAKE FINAL DETERMINATION REGARDING 212(e). | | | | | | | | | |
| EXCHANGE VISITOR CERTIFICATION: I have read and agree with the statement in item 2 on page 2 of this document. | | | | | | | | | |
| Signature of Applicant | | | Place | | | Date (mm-dd-yyyy) | | | |

c. H-1B, I-797

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

Department of Homeland Security
U.S. Citizenship and Immigration Services

I-797B, Notice of Action

THE UNITED STATES OF AMERICA

| | | |
|--|----------------|---|
| RECEIPT NUMBER EAC-11-209- [REDACTED] | | CASE TYPE: I129 PETITION FOR A NONIMMIGRANT WORKER |
| RECEIPT DATE July 18, 2011 | PRIORITY DATE | PETITIONER [REDACTED] |
| NOTICE DATE March 9, 2012 | PAGE 1 of 2 | BENEFICIARY [REDACTED] |
| [REDACTED] | | Notice Type: Approval Notice Class: H1B Valid From 03/08/2012 to 09/30/2014 Consulate: KARACHI |

The above petition has been approved, and notification has been sent to the listed consulate. You may also send the top-right portion part of this notice to the worker(s) to show the approval. Please contact the consulate with any questions about visa issuance. THIS WORK IS NOT A VISA AND NOT VALID FOR TRAVEL TO A VISA.

Petition approval does not authorize employment in the U.S. When the workers are approved status upon admission to the United States, they are then work for the petitioner, not only as detailed in the petition and the petition supporting documents. Please contact the INS with any questions about the workholding.

If circumstances change, the petitioner and file Form I-424 to have us notify another consulate of this approval. If any of the workers are already in the U.S. the petitioner can file a new Form I-129 to seek to change or extend their status based on this petition. Changes in employment or training may also require a new petition. Include a copy of this notice with any other required documentation.

If any of the workers included in this petition do not currently work in the United States, and substitutions of different workers are not made, the petitioner must notify this office of the alternate submission visa numbers can be re-used.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa for admission to the United States, or for an extension, change, or adjustment of status.

Number of workers: 1
Name: [REDACTED] DOB: [REDACTED] COE: [REDACTED] CLASS: D-129 / FOR: H1B
[REDACTED] PARISTAN [REDACTED] VISA: KARACHI [REDACTED]

The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Inspector General.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

U.S. CITIZENSHIP & IMMIGRATION SVCS
VERMONT SERVICE CENTER
75 LOWER WELDON STREET
SAINT ALBANS VT 05479-0001
Customer Service Telephone: (800) 375-5283
Form I-797B (Rev. 10/31/05)N



Please tear off portion below and forward it to the alien worker

The alien may use this portion when applying for a visa at an American consulate abroad, or if no visa is required, when applying for admission to the U.S.

| | | |
|--|---------------------------------|--------------------------|
| Receipt #: EAC-11-209- [REDACTED] | Case Type: I129 | Number of Workers: 1 |
| Notice Date: March 9, 2012 | Petitioner: [REDACTED] | |
| Petitioner Validity Dates: Valid From 03/08/2012 to 09/30/2014 | | |
| Name: [REDACTED] | DOB: [REDACTED] COE: [REDACTED] | Class: D-129 / FOR: H1B |
| [REDACTED] | [REDACTED] PARISTAN [REDACTED] | VISA: KARACHI [REDACTED] |

Form I-797B (Rev. 10/31/05)N

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

- a. Your [I-94 admission record in CBP's electronic system](#) 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.
- b. 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



Most Recent I-94

Admission (I-94) Record Number : [REDACTED]

Most Recent Date of Entry: 2016 October 12

Class of Admission : J1

Admit Until Date : D/S

Details provided on the I-94 Information form:

Last/Surname : [REDACTED]

First (Given) Name : [REDACTED]

Birth Date : [REDACTED]

Passport Number : [REDACTED]

Country of Issuance : Korea, South

[Get Travel History](#)

► Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).

► If an employer, local, state or federal agency requests admission information, present your admission (I-94) number along with any additional required documents requested by that employer or agency.

► Note: For security reasons, we recommend that you close your browser after you have finished retrieving your I-94 number.

OMB No. 1653-0111
Expiration Date: 10/31/2017

[For inquiries or questions regarding your I-94, please click here](#)

[Accessibility](#) | [Privacy Policy](#)