



F-1 Status Time Off Request Form (TORF)

Email to f1@sfsu.edu from your SF State email address. Requests are processed within 5 business days.

We accept digital signatures, scanned copies, and high resolution/clear pictures of the completed form.

Student Information					
Last Name:		First Name:			
SF State Student ID:		I-20 SEVIS ID:	Noo		
Phone:		SF State Email:	@mail.sfsu.edu		
Major:		Second Major:			
Degree level:	☐ Bachelor's	☐ Master's	I-20 Expiration Date:		
Expected Graduation:	☐ Fall	☐ Winter	☐ Spring	☐ Summer	Year:
Overseas Mailing Address:					

Duration of Time Off Request					
Semester and Year of Leave:	☐ Fall	☐ Spring	Year:	Departure Date:	
Expected Semester of Return:	☐ Fall	☐ Spring	Year:	Return Date:	
Expected Time Outside the U.S.:	☐ More than 5 months ☐ Less than 5 months ☐ Will not return ☐ Undecided				
Reasons of Leave:	☐ Withdrawal from SF State (Must leave the U.S. within 15 days of the withdrawal date)				
	☐ Graduate thesis/project/research abroad (Bring memo from the academic department)				
	☐ Study Abroad (Attending Certified CSU/SF State Bilateral Program)				
	☐ Other:				

Student Signature	
<i>By signing this request form, I confirm that I have read the instructions for Leave of Absence at oip.sfsu.edu/f1loa and understand the regulation and my responsibilities. I understand my I-20/ SEVIS record will be terminated and my current I-20 is no longer valid. I also confirm that I will leave the U.S. within 15 days from the day I submit my LOA form.</i>	
Student Signature:	Date:

OIP Office Use Only			
Date received:	Processed Date:	Processed By:	Scanned By: