

International Student Program Notification of Early Program Departure (Student Returning to Home Country)

Today's Date (Example: JAN-01-2019):	ISP Student Number:
Date of Departure (MMM-DD-YYYY):(Your school will cancel any academic/attendance records after this date for students returning home.)	
STUDENT INFORMATION	
Legal Last Name:	Legal First Name:
English Name:	Birthdate (MMM-DD-YYYY):
Current BSD School:	Current Grade (this school year):
Student's Email:	
REASON FOR EARLY DEPARTURE:	
*** IMPORTANT NOTICE *** Students will be removed from the International Student Program medical insurance plan and their Study Permit will no longer be valid. Students who do not complete their school program may risk not receiving final marks for their courses.	
Student Legal Name:	Parent/Custodian Legal Name:
Student Signature:	Parent/Custodian Signature:
Please email this form along with any required documents to the International Education Department at international@burnabyschools.ca .	
OFFICE USE ONLY – DO NOT COMPLETE:	
Name of International Student Assistant (ISA) passing on reques	st: Date:
International Education Manager Approval:	Date:
☐ Secondary: VP-Intl + SISOP + ISA + Medical + Langara Homest	ay
	te: PROCEDURES/DOCUMENTS (check if
☐ Elementary: Principal + Secretary + Medical + Elementary Pla	☐ Undated TN database
Emailed By: Da Uploaded Sent Email to School by:	lssued Letter to CIC

Updated: October 2023