

International Travel Validation Information

Dear Intrax Participant.

Please find below the necessary information/form for DS-2019 Form Travel Validation.

Deadlines: Travel Validation Form and Original DS-2019 Form must be received in our office 2 weeks before the intended Travel Date.

Please Note: International Travel during the Intrax Program is limited to a maximum of 1 month with Host Company Approval.

Please note that it is your responsibility to provide us with a **self-addressed envelope with correct postage** in which to send your DS-2019 Form.

We will not require a copy of your visa but you must make certain that your visa remains valid by the time you reenter the USA.

Please mail us your:

1. **Original DS-2019 Form (We do not need your SEVIS receipt but you should always keep it)**
2. **Signed Travel Validation Form (Signed by the Host Company as well)**
3. **Pre-paid FedEx Envelope or self-addressed, stamped envelope with correct postage including the following:**
 - Non Post Office Box USA Address with phone number OR
 - Foreign Address with local phone number
 - **NOTE:** You must pre-pay the correct amount for the FedEx Envelope or for an ordinary envelope. This depends on how fast you would like delivery.
 - If you choose the FedEx option, you will need to check with a FedEx agent to see that the weight of the DS-2019 Form will be taken into account when obtaining the pre-paid Envelope.
 - **Intrax will not be able to assist you with FedEx procedures.**

Any missing materials will cause delays in the processing of your Travel Validation Form:

Thank you and we wish you a pleasant trip.

**Please mail Travel Validation Request Materials to:
Intrax Cultural Exchange: ICD
600 California Street Floor 10
San Francisco, California 94108-2730
Toll Free: 1 888 224-0450**

International Travel Validation Request Form

[You may substitute your Airline Itinerary with the same information as long as you and your Supervisor sign this form. If you are driving, please provide approximate travel dates.]

DEPARTURE FLIGHT DETAILS

Your Participant ID Number:

Your family name/first name:

Departure Airport/City in US:

Departure date/time:

The flight number for that flight and Airline:

Your final destination airport abroad:

Purpose of travel:

RETURN FLIGHT DETAILS

Departure Airport/City abroad:

Departure date/time:

The flight number and Airline:

Your final destination airport in the US:

The date and time of your arrival in the US:

The above/attached details are correct. My Host Company _____ is aware of my travel arrangements, has agreed to my taking this time off from the Intrax Program and affirms that I am in good standing.

Participant Name/Signature: _____ Date: _____

Supervisor Name/Signature: _____ Date: _____

Please mail Travel Validation Request Materials to:

**Intrax Cultural Exchange: ICD
600 California Street, Floor 10
San Francisco, CA, 94108
Toll Free: 1 888 224 0450**