

NOTICE OF EXTENSION OR DEPARTURE (NED)

Email completed form to: internationaloffice@harvard.edu

Scholar Information:

Family Name(s): _____ Given Name(s): _____

Date of Birth: _____ Phone: _____ Email Address: _____

Scholar's U.S. Residential Address: (confirm with scholar) _____

Please choose ONE of the following:

The scholar is leaving / left my department as of _____ (mm/dd/yyyy) and is leaving/left the U.S.
(Note: Please provide the scholar's last day with the department, and not his/her last day in the U.S.)

The scholar is leaving the U.S. on _____ but will return to Harvard as of _____

The scholar has left my department on _____ and is moving to a different Harvard department.
New Department: _____

The scholar left my department on _____ and is moving to another employer in the U.S.

The scholar will continue to work in my department but has obtained U.S. permanent residency status.
Please include copy of green card or other proof with this form.

The scholar will continue to be employed in my department: *(extensions and funding updates)*

Same Harvard/Hospital Title Appointee's new Harvard/Hospital Title: _____

Reappointment dates: From _____ To _____

Exact address where individual will work: _____

_____ Hours per week: _____

Funding Information: **(Please provide funding information for the extended/updated period only.)**

Total Harvard Salary: \$ _____

Total Funding Amount from Other Organization(s): \$ _____

Organization(s) Name(s): _____

Total Personal Funds: \$ _____

Department Contact Information:

Administrator Name: _____ Email: _____

Name of the Department and/or Hospital: _____

Complete mailing address: _____

Phone: _____ Fax: _____

Date this NED completed: _____ Check this box if amending a previously submitted NED:

Print name of person preparing/submitting this form: _____

HIO Internal Use Only: SEND EV PROGRAM SHORTEN EVENT (PASS TO MF)

MAKE CLIENT'S RECORD COMPLETE AND CHANGE END DATE TO: _____

ADD NOTES IN ISSM: _____

FOR RECORDS THAT DO NOT NEED TO BE SHORTENED (TRANSFER, LESS THAN 30 DAYS, NO CHANGE IN DATES, ETC.) RETURN TO FILE ROOM