School Reporting Template for COVID-19

Instructions

SEVP is providing this optional template for schools to use as they consider procedural adaptations in response to COVID-19.

Schools must provide SEVP notice of the requested information within 10 business days of the date of the decision to initiate the operational change. Send this information to the SEVP Response Center at SEVP@ice.dhs.gov. In the subject line, include “COVID-19 School Operations [School code].”

Schools are encouraged to provide additional details regarding their emergency operations plans beyond the questions detailed in this template.

SEVP maintains the right to conduct out-of-cycle reviews to ensure compliance with all recordkeeping and reporting requirements consistent with implementation of any approved plan.

* — indicates a required field
Reporting Template

School Information

1. School Name*
2. School Code*
3. School Official Making this Report
   - Name and Title*
   - Are you a P/DSO?*
   - Contact Information
     - Email Address
     - Desk Phone
     - Cell Phone

2. Does this procedural change apply to all physical locations listed on your Form I-17?*
   If NO, please list which physical locations are exempted, including campus codes:

3. What is the effective date of your procedural changes? When do you anticipate returning to standard procedures?*

4. Does your school currently have an emergency operations plan that includes provisions regarding F-1 and/or M-1 students?

Procedural Changes

Which of the following will your school use?*

1. Online instruction: YES NO
2. Alternate physical site(s): YES NO
3. Reduced session: YES NO
4. School closure: YES NO

Please provide the following information for any procedural changes for which you marked YES:
Online Instruction* (required only if applicable)

1. Will all your courses be provided online?
   If NO, what are the names of the programs of study that will be taught online?

2. What is the nature and type of the online instruction you will be using (e.g., live videoconferencing courses, pre-recorded videos, audio-only, etc.)?

Alternate Physical Site(s)* (required only if applicable)

1. What are the addresses of the alternate physical locations where F-1 and/or M-1 students will be studying?

2. What is the nature and type of instruction (e.g., in-person classes, online, etc.) your school will offer at the alternate physical sites listed above?

Reduced Session* (required only if applicable)

1. What will be your school’s new current session end date?

2. Prior to this change, what was your school’s current session end date?

3. What official grade notation will students that enrolled in courses receive upon completion of the reduced session (i.e., a letter grade, did not complete notation, withdrawal notation, etc.)?

4. For purposes of your school’s academic calendar, will the session following your current session be considered a vacation period?

5. What will be your school’s next session start date?

School Closure* (required only if applicable)

1. On what date will your school close?

2. On what date do you anticipate your school reopening?

3. Will you be providing any instruction during this time?

4. Will any school services (e.g., food service, housing, etc.) be available to students during the school closure?
F-1 and/or M-1 Student Oversight

1. How does your school plan on maintaining F-1 and/or M-1 student oversight for the duration of the procedural changes?*

2. How does your school plan on adequately offering DSO services to F-1 and/or M-1 students?*

3. How does your school plan on ensuring F-1 and/or M-1 students maintain a full course of study?*