



**Program Extension Request Form**

**Section A: To Be Completed by Student**

Name: \_\_\_\_\_  
Last Name First Name

Immigration Status: [ ] F-1 [ ] J-1 SEVIS ID# \_\_\_\_\_

Current End Date of I-20 or DS-2019: Month: Day: Year:

School/Department: \_\_\_\_\_ Email: \_\_\_\_\_

Check the appropriate box if you need an I-20/DS-2019 for F-2 or J-2 dependents:

[ ] Spouse [ ] Children (How many?)

Has there been a change in the source of your funding?

[ ] No [ ] Yes (Attach required documentation.)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section B: To Be Completed by Student’s Academic Advisor**

**Note to the Academic Advisor:** The above named student has requested an extension of the time limit placed upon the F-1 or J-1 nonimmigrant student's length of study. The purpose of this form is to provide information required by US Citizenship and Immigration Services (USCIS). Additional course(s) must count toward degree, including any course(s) that will be applied toward more than one major or concentration.

**1. The above named student has been and continues to be enrolled in a full course of study and is making normal academic progress in his/her academic program:** [ ] Yes [ ] No

**2. I anticipate this student will complete all requirements for the degree on or about:**

Month: Day: Year:

**3. This student has not yet completed the current program of study due to (please explain below):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**6. I therefore recommend that this student be allowed the additional time necessary to complete the academic program.**

Academic Advisor’s Name: \_\_\_\_\_

School/Department: \_\_\_\_\_ Email: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_