



**F-1 Student Program Extension Part 1: To be completed by student**

Please complete Part 1 of this form and give it to your current academic advisor to complete Part 2. Then submit completed form with updated proof of financial support to IPO.

Student's name \_\_\_\_\_  
(First name) (Last name or family name) (Date)

Local Address \_\_\_\_\_

Date of Expiration on I-20 form \_\_\_\_\_

Request for program to be extended until end of: Fall Spring Summer 20\_\_\_\_\_

**Part 2: To be completed by Academic Advisor**

The above named student has applied for an extension of his or her immigration documents. Please provide information requested below.

1. The student is engaged in the following academic program:

Major \_\_\_\_\_ Degree \_\_\_\_\_

2. Has the student been making normal program toward his/her current degree?

\_\_\_\_\_ Yes \_\_\_\_\_ No

3. This student will complete requirements for his/her current program on: \_\_\_\_\_  
(mm/dd/yy)

4. This student has no yet completed the current program of study due to: (check all that apply)

\_\_\_\_\_ Delay caused by a change in major field study

\_\_\_\_\_ Delay caused by lost credits upon transfer to our school

\_\_\_\_\_ No unusual delay. The original length of time given to complete studies was not reasonable for an average student in this program

\_\_\_\_\_ Delay caused by documented illness(es). Documentation must be provided if not already on file

\_\_\_\_\_ Course not offered every semester, thus student could not have taken it at another time

\_\_\_\_\_ Other (please explain on the reverse of this form)

**I therefore recommend that this student be allowed addition time to complete studies.**

\_\_\_\_\_  
(Signature of Advisor)

\_\_\_\_\_  
(Printed Name and Title)

\_\_\_\_\_  
(Date)