**Program Extension Request Form**

|  |
| --- |
| **To be completed by student** |
| Name: |
| SU email: |
| Current visa: ☐ F-1 ☐ J-1 |
| Current program end date on I-20 or DS-2019: \_\_\_\_\_\_/\_\_\_\_\_\_/ \_\_\_\_\_ |
| To be completed by academic advisor or program coordinator |
| The student experienced a delay in his or her program due to the following reasons (check all that apply):    ☐ Change in major or field of study  ☐ Inadequate time on original immigration form to complete program requirements  ☐ Change in research topic or unexpected research problems  ☐ Medical condition  ☐ ESL extension (maybe extended for no more than one academic year)  Is the student making normal progress towards his/her degree?  ☐ yes ☐ no  Date on which student is expected to complete all  coursework for degree (**not** graduation date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Advisor signature Date*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Name (please print)* |