



Extension of Time to Complete Program

Definition:

If a student is unable to complete the program by the completion date under Program of Study on the I-20, she/he must apply to extend the I-20 until the program completion. An "Extension of Time to Complete Program" can be granted to students who have continually maintained F-1 status and whose program completion has been delayed due to compelling academic or medical reasons.

Eligibility:

In order to be eligible for an "Extension of Time to Complete Program":

1. You must have continually maintained your F-1 or J-1 status and
2. Your delay must have been caused by compelling medical or academic reasons, such as documented illness, changes in major or research topic, or unexpected research problems.

When to Apply:

The student must apply for the extension **before** the program completion date on the I-20. If the expiration date on the document has passed and an extension has not been requested, the student is in violation of status and may, in unique cases, apply for reinstatement.

Procedures:

To apply for an "Extension of Time to Complete Program" you must submit:

1. A completed "Academic Advisor's Recommendation Form for Program Extension" completed by you and your Academic Advisor (on the back of this page).
2. Updated Financial Documents if extension is needed for more than two quarters.
3. Updated insurance coverage for the length of time your program is extended.

Global Education office will prepare a new I-20 and authorize the extension for the appropriate period of time within 2 business days of receipt of all documentation.



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Academic Advisor's Recommendation

*If you have any questions regarding this form, contact the Global Education at
SFCC 509-533-4131, SCC 509-533-8885*

This section to be completed by the student:

Name: _____ DOB: _____

Address: _____

Street Address

City

State Zip Code

Telephone#: _____

Email: _____

Degree in Progress: _____

Major: _____

I have extended valid and appropriate medical insurance coverage for 1 year or until the program end date on my I-20 for myself and my dependents: Yes No

Neither I nor any member of my family has violated the conditions of our visa status. I verify that, to the best of my knowledge, all information provided on this form is current and accurate.

Signature: _____ Date: _____

This section is to be completed by the academic advisor: The student named above is requesting an extension of stay in accordance with the regulations of the Department of Homeland Security. *The regulations allow for an extension for documented illness and bona fide academic reasons, such as a change of major or research topics and unexpected research problems (delays caused by academic problems or suspensions are not acceptable).* Please comment on the reason for additional time to complete program. If you require additional space, please attach another piece of paper.

The student is unable to complete degree requirements by the current end date on the I-20 due to:

- Delay caused by change/addition of major Delay caused by loss of transfer credit hours
- Delay caused by change in research topic
- Initial program end date unrealistic for program; average length of students in program: _____ years
- Other; please *thoroughly* explain the academic reason why the student is delayed in completing their program requirements: _____

Please note that delays caused by academic probation or suspension are not permissible reasons for an extension.

Do you support the request for addition time to complete the program? Yes No

Expected Degree Completion Date: ____ / ____ / ____

Signature: _____ Date: _____

Name and Title (please print): _____ Department: _____