

Extension of Time to Complete Program

Definitions

If a student is unable to complete their program of study by the completion date in #5 on the I-20 or #3 on the DS-2019, they must apply to extend the I-20 or DS-2019. An extension can be granted to students who have continually maintained F-1 or J-1 status and whose program completion has been delayed to compelling academic or medical reasons.

Eligibility

In order to be eligible for an extension:

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, unexpected research problems, or documentation that you are still actively pursuing academic courses related to your degree.

When to Apply

The student must apply for the extension **before** the program completion date on the I-20 or DS-2019 document. If the expiration date on the document has passed and an extension has not been requested, the student is in violation of status and will need to leave the country.

Procedures

To apply for an extension, you must submit:

1. A completed "Academic Advisor's Recommendation Form" completed by you and your Academic Advisor (on the next page)
2. Certification of Financial Support (updated)
3. Updated Financial Documents
4. Supporting documents (medical records)

International Programs will prepare a new I-20 or DS 2019 and authorize the extension for the appropriate period of time.

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Academic Advisor's Recommendation Form

This section to be completed by the student.

1. Name: _____
Family name (Last) First name (Given)
2. Humboldt Student ID #: _____ 3. Date of birth: _____
4. Address (street, city, state, zip): _____
5. Phone number: _____ 6. Email: _____
7. Degree in progress: _____ 8. Major: _____

I have extended, valid and appropriate medical insurance coverage for 1 year or until the program end date on my I-20/DS-2019 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 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, unexpected research problems, or documented evidence that student is still pursuing academic courses necessary to obtain intended degree (delays caused by disciplinary problems or suspensions are not acceptable). Please comment on the reason for additional time to complete program. If you require additional space, please attach additional paper.

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

Advisor name: _____ Advisor title: _____
Advisor email: _____ Advisor phone: _____

Advisor signature

Department

Date