

PROGRAM EXTENSION

This form must be completed and submitted to the Office of International Programs at least 30 days prior to the current expiration date on the I-20 or DS2019. Student will be notified when new document is ready for pick up.

SECTION I

To be completed by the Student:

Name _____ Date of Birth _____
Family First Full Middle MM/DD/YYYY

SECTION II

To: Academic Advisor:

The international student listed above wishes to apply for an extension of the time for completion of his/her program of study. Please complete items 1-5, sign and return the form to the Office of International Programs at 4016 Student Center.

1.) Student is enrolled in the following program: Major _____ Degree _____

Number of credits required for degree _____ Total credits earned to date _____

Additional degree requirements (indicate if met and date):

2.) Is the student making normal progress toward her/his degree? _____

3.) Reason(s) the student will not have completed the program of study by the end date listed on the I-20 or DS2019:

- Change in major field of study
 Change in research topic
 Unexpected research problems (explain) _____
 Medical reasons (submit evidence)
 Other (explain) _____

4.) Date of anticipated completion of degree requirements _____

5.) Do you recommend that the student be granted additional time to complete his/her program? _____

Advisor's Signature _____ Date _____

Printed Name _____ Title _____

Department _____ KUMC Address _____

6.) Signature of Head of Program/School _____ Date _____

Printed Name _____ Title _____