



## Extend/Shorten Program Completion Date

The information below is required to grant an extension or report a shortened completion date for students in F-1 or J-1 status. The scheduled date is listed on your current I-20 (see item #5) or DS-2019 (see item #3). If you will complete your degree requirements earlier or later than this date, the correct date must be reported to SEVIS and a new document will be issued. Program extensions require additional consideration (see below).

If your funding details will change from what is currently listed, either by source or amount greater than 30%, please attach the [Financial Update](#) form. These updates can be processed together to issue a single new I-20 or DS-2019.

**Additional information for Program Extensions:** To apply you must have continually maintained status and document that the extension is needed for compelling academic or medical reasons such as a change in study, unexpected problems or documented illness. Academic probation or suspension alone are not acceptable reasons for an extension of stay. **Program extensions must be requested at least 2 weeks before your current form will expire.**

**Student Information:** University ID#: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Current Completion Date on I-20/DS-2019: \_\_\_\_\_ Has your funding information changed?  Yes  No

**Recommendation of Academic Advisor:** This student is requesting a change to the completion date estimated for his or her current program of study. Please indicate whether this change is appropriate and the specific new date.

**New Expected Date of Completion:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Recommended Action:**  Extend  Shorten

For extensions, please identify the compelling academic or medial reason, as listed below.

- Change of major or field of study
- Unexpected research problems
- Change in research topic
- Credits lost upon academic transfer to UR
- Documented illness
- Other (please explain): \_\_\_\_\_

Has this student maintained continuous enrollment?  Yes  No

If No, please explain: \_\_\_\_\_

Advisor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Certification from Dean's Office:</b>		
<i>Grad/Undergrad Dean's Signature</i>	<i>Name (print)</i>	<i>Date</i>