

521 Lancaster Avenue • Whitlock 455, CPO 69

Richmond, KY 40475

Phone: 859-622-1478 • Fax: 859-622-1552

Email: <u>international@eku.edu</u> <u>http://www.international.eku.edu</u>

PROGRAM EXTENSION FOR F-1 OR J-1 STUDENTS

OVERVIEW

An F-1 student may request for an extension of stay if he/she will not complete his/her course of studies by the date indicated on the SEVIS Form I-20 or DS-2019. If additional time is required, the student must contact Office of International Student and Scholar Services and submit the request for extension of program at least 60 days before the end date on the current I-20 or DS-2019.

ELIGIBILITY

To be eligible for an extension you must:

- Have continually maintained full-time F-1 or J-1 status, and
- Have compelling academic or medical reasons that caused the delay.

If the student violated his/her status as an F-1 or J-1 student and is out of status, the student must complete a reinstatement instead. *Delays due to academic probation or suspension do not qualify for extension*.

APPLICATION PROCEDURE

The student must make an appointment to meet the International Student Advisor and bring the following documents to the appointment:

- 1. A completed Program Extension Form signed by your academic advisor;
- 2. Financial documents indicating your ability to pay to continue your studies to the new anticipated completion date;
- 3. Student's current SEVIS Form I-20 or DS-2019.

Please make sure you and your academic advisor complete the Program Extension Form on page 2 of this form to apply for extension.



521 Lancaster Avenue • Whitlock 455, CPO 69

Richmond, KY 40475

Phone: 859-622-1478 • Fax: 859-622-1552

Email: international@eku.edu
http://www.international.eku.edu

PROGRAM EXTENSION REQUEST FORM

PART I: TO BE COMPLETED BY THE STUDENT	
Last Name:	First Name:
	SEVIS ID# (from I-20 or DS-2019): N
	Level: Bachelor Master Doctorate
	State: Zip Code:
Permanent Foreign Address:	
City:	Province/State/Region:
Country:	Postal Code:
☐ I need more time to complete my degree d	ne to medical reasons:
Date(s) of illness or medical condition:	
☐ Doctor's document is attached	
☐ Doctor's document is on file in the Offi	ee of International Student and Scholar Services
PART II: TO BE COMPLETED BY ACAI	NEMIC ADVISOD
PART II: TO BE COMPLETED BY ACAI	DEMIC ADVISOR
☐ Delay was caused by a change in major field of study	
☐ Delay was caused by a change in research topic	
☐ Delay was caused by unexpected research problem(s)	
☐ Delay was caused by lost credits upon transfer to Eastern Kentucky University	
Other compelling academic reason (explain	n):
Number of credits remaining:	Expected term of degree completion:
	n of study has been caused by the compelling academic reason indicated at be allowed additional time to complete his/her program of studies.
Name:	Phone:
Ciaratura	Deter