

**International Student Services** 

300 East College Avenue Eureka, Illinois 61530-1500 309.467.6477

## I-20 PROGRAM EXTENSION REQUEST FORM

F-1 Students, if you are unable to complete your program of study by the expected completion date indicated on your I-20, you must request a program extension at least thirty (30) days before the completion date. To apply for a program extension, you will need the following:

- 1. This form, completed by you and your advisor and returned to the Coordinator of International Student Services
- 2. Current bank certification letters (in English) showing evidence of financial support

TO BE COMPLETED BY THE STUDENT:
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Student's Name:				
	(Family Name)	(First name	) (Middle I	nitial)
SONIS ID:		SEVIS ID:		
lajor:		I-20 Completion Date:		
y USCIS regulations. The comple	ed for your conveniend etion of this form is nee of study. Please compl	ce and is designed to facilitate the ded for an F-1 international stude ete this form in its entirety and asl	nt to be granted a pro	gram extension to
Academic History:	,			
Total credits earned to date:	Number o	of credits required for degree:		
Describe any additional require	ments:			
□ Delays caused by a cl	nange in major field of s umented medical probl credits upon transfer		ll that apply)	
I recommend that this student all requirements for the current		time to complete his/her studies. I (approximate date):	anticipate that this st	udent will complete
	(month)	(day)	(year)	
Advisor Name (Print): Faculty Advisor Signature: _			Date: /	1
		ED SCHOOL OFFICIAL	` ,	
ignature of (P)DSO			Date Processed:	/ /
Comments:				