

## **Student Form I-20 Request**

Date of Birth (mm/dd/year):

**Student ID Number:** 

## Section A: To be completed by the student:

Name as in Passport (Surname/Last, Given Name):

Email Address:	Level of Education:	College:		
	☐ Bachelor's ☐ Master's	☐ Liberal Arts/Social Sciences ☐ Business		
	☐ PhD ☐ Law ☐ Certificate	☐ Engineering ☐ Science ☐ Urban Affairs		
		☐ Law ☐ School of Nursing		
		☐ Education/Health Services		
Important notes, please read:				
<ul> <li>This request should be received by the CISP International Team at least 30-60 days prior to the expiration date</li> </ul>				
on the current Form I-20. If the student fails to meet the deadline, there is no guarantee that the request will be				
processed before the current Form I-20 expires. This will have a negative impact on the student's immigration				
status.				
To be eligible for extension, you must be maintaining status, making normal progress toward completion of				
degree and have academic requirements remaining.				
<ul> <li>Extensions may only be granted to students who can demonstrate that they have compelling <u>academic</u> or</li> </ul>				
medical reasons.				
• The academic advisor must complete and sign this entire form before an extension request can be				
<ul> <li>approved by the CISP International Team.</li> <li>Delays caused by academic probation or suspension are not acceptable reasons for program extension (8)</li> </ul>				
<ul> <li>Extension request <u>will not</u> be granted for delays caused by employment like Curricular Practical Training</li> </ul>				
(CPT).	I" as "N" are dee as to allow a study of	tta aanaalata an intamaalin		
• Form I-20 <u>will not</u> be extended for "	i or x grades or to allow a studen	t to complete an internship.		
<ul> <li>I certify I have read the request form</li> </ul>				
<ul> <li>I certify the information I have provided is, to the best of my knowledge, accurate.</li> </ul>				
<ul> <li>I understand I must report any address current (U.S.) through CampusNet within 10 days of the change.</li> </ul>				

\*\*\*\* Please Allow 5 Business Days to Process \*\*\*\*

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



## **Section B: Reason for Extension:**

Please indicate a choice below:						
☐ Form I–20 Extension for Academic Delay:						
_	0	<del>-</del>	by your academic advisor, as to why an extension is needed. The form			
			r before your I-20 extension can be approved.			
	Form I–20	I–20 Extension for Compelling Medical Issue:				
	0		by your academic advisor, as to why an extension is needed. The form			
			r before your I-20 extension can be approved.			
_	0					
		orm I-20 Change of Major: Attach documentation of the new major.				
	0	Attach documentation of the new major.  Sponsored students must submit change of major approval from sponsoring agency.				
	0					
	<ul><li>Example: New Financial Guarantee showing new major</li><li>Form I-20 Change of Funding:</li></ul>					
	0	Attach documentation of the new funding so	ource.			
	Form I-20		741 001			
Section C: To be completed by Academic, Program, or Faculty Advisor:						
Term in which ALL degree requirements are anticipated to be complete:						
☐ Fall 20 (Dec) ☐ Spring 20 (May) ☐ Summer 20 (Aug)						
Please explain the reason why the student was not able to complete the program as originally expected (such as						
change of major or research topic, unexpected research problems, or documented illness):						
thange of major of research topic, anexpected research problems, or abcumented ninessy.						
Lucyify that the information above is connect and consulate. This student is mading normal progress to your tha						
I verify that the information above is correct and complete. This student is making normal progress toward the completion of his/her degree. I recommend this student's stay be extended as indicated above.						
COM	Jietion or	mis/fier degree. Frecommend this student	s stay be extended as indicated above.			
Advisor's Signature:		ature:	Date:			
		or printed):	Phone:			
	c (c) pcu c		. Heller			
Depa	artment:		Email:			
Section D: To be filled out by CISP International Team						
CISP International Team Verification						
CISP Signature:			Date:			