

Request for I-20 Extension Faculty/Academic Advisor Recommendation

The United States Citizenship and Immigration Services (USCIS) regulations state, "An F-1 student who is currently maintaining status and making normal progress toward completing his or her educational objective, but who is unable to complete his or her course of study by the program end date on the Form I-20, must apply prior to the program end date for a program extension..." [(8CFR214.2(f)(7)(i)].

IMPORTANT DEADLINE INFORMATION: This form **must** be submitted to International Student Services (ISS) at least two weeks prior to the expiration date on your current I-20. ISS cannot guarantee this request will be processed by your current program end date if you fail to meet this deadline. This may result in a status violation requiring you to apply for reinstatement to F-1 status.

Family Name _____ Given Name _____

myWSU ID _____ SEVIS ID (found on I-20) _____

WSU Email _____

This section must be completed by the Faculty/Academic Advisor, NOT THE STUDENT:

This is to confirm that the above-named student is expected to complete the requirements for the degree of _____ in _____

B.A., B.S., B.B.A., M.A., M.S., M.B.A., Ph.D., etc. _____ Major _____

on _____ *(Expected Semester of Completion)* (This may be different from student's official graduation date)

- Delay caused by a change in major field of study (or the addition of another major).
- Delay caused by a change in research topic.
- Delay caused by unexpected research problems.
- Delay caused by medical illness.
- Delay caused by lost credits upon transfer to WSU.
- Original I-20 completion date was not sufficient for student to complete program requirements.
- Other (please explain in the comment box below). Immigration regulations state that I-20 extensions may only be granted when "caused by compelling academic or medical reasons." **Financial difficulties, academic probation, or suspension are not eligible reasons for an I-20 program extension.**

Signature of Advisor _____ Date _____

Name of Advisor _____ Phone _____
Please print

GRADUATE STUDENTS ONLY: Upon the third or subsequent request for an extension, the student must also seek approval from the Graduate School. Please attach a letter to this form providing detailed information about why you have not been able to complete your program in the allotted time, including a timeline detailing your plan to meet your new expected semester of completion. The letter **must be signed by your advisor** before being submitted to the Graduate School for approval.

Graduate School Approval Graduate School Denial (Contact ISS in case of denial)

Signature _____ Date _____