A 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 for a program extension prior to the program end date. The designated school official must certify that the student has continually maintained status and that the delays are caused by compelling academic or medical reasons, such as changes of major or research topics, unexpected research problems, or documented illnesses. Delays caused by academic probation or suspension are not acceptable reasons for program extensions.

The student applying for a program extension should submit the following documents:

- Affidavit of Financial Support
- Supporting Evidence of Financial Support (Bank Statements)
- Program Extension Form – Completed by Academic Advisor
PROGRAM EXTENSION FORM  
F-1 INTERNATIONAL STUDENT  
PRAIRIE VIEW A&M UNIVERSITY

A 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 for a program extension prior to the program end date.

STUDENT Name: __________________________ Signature: __________________________ Date: __________
Student ID Number: __________________________ I-20 Completion Date: __________________________
Telephone Number: __________________________ E-Mail: __________________________
Is this your first extension for this degree? ___Yes   If No – Explain: __________________________

ALL INFORMATION ON THIS FORM WILL BE REPORTED TO THE DEPARTMENT OF HOMELAND SECURITY.

Academic Advisor or Graduate Faculty Advisor – Please check the reason that applies to the above student’s request for a program extension.  Note: Advisors – Please complete and sign in blue ink.

Is this student in good academic standing and is a program extension for this student supported by the department?  ___Yes   ___No  If No – Explain: __________________________

___ The student requires more time to complete the degree. Original time stated on the I-20 is less time than stated in the university catalog for this degree program.
___ The student has or had a medical reason: The student must attach documentation from his/her health care provider.
___ The student changed majors.
___ The student changed research topics.
___ The student has unexpected research problems.
___ Other: __________________________

Any item checked will require the academic advisor’s explanation for the program extension.

Advisor’s Explanation: __________________________

What requirements remain for the degree completion: __________________________
Student’s Expected Date of Degree Completion: __________________________

Name: Academic or Graduate Faculty Advisor __________ Signature: Academic or Graduate Faculty Advisor __________ Date __________

INTERNATIONAL STUDENT ADVISOR  
Program Extension Approved – New Program End Date: __________________________

Evelyn J. McGinty __________ Date __________
PDSO/Immigration Services Associate

Revised 10/26/2011EJM