

**ACADEMIC ADVISOR'S RECOMMENDATION FOR
EXTENSION OF TIME IN F-1/J-1 STUDENT STATUS**

Academic Advisor:

The international student listed below is requesting to extend his/her academic program beyond the original anticipated completion date indicated on his/her immigration record (I-20/DS-2019). In order to have an extension of time granted, an explanation must be provided. Please complete this form and return it via interoffice mail to: **International Services Office**, Reed Hall 122 or return to the student for delivery. **This is a time-sensitive process.** It must be completed approximately 30 days prior to the end of current academic term. Questions should be directed to ISO at (239) 590-7925.

Student to Complete the Following:

Student Name: _____ **Student UIN:** 814 _____

Current Major of Studies/Degree: _____

Academic Advisor to Complete the Following:

1. I anticipate this student will complete all requirements for the current academic program on:

_____ (Month) _____ (Day) _____ (Year) _____ (Academic Term/Semester)

2. This student has not yet completed the current program of study due to delay caused by (Check all that apply):

- _____ Change of major
- _____ Additional time required to complete program
- _____ Documented medical reasons
- _____ Unexpected problems (due to no fault of the student)
- _____ Transferred from another institution resulting in loss of some credits
- _____ Other: _____

Note: Delays caused by academic probation/ suspension are not acceptable reasons for immigration program extensions.

I recommend that this student's program be extended to the above indicated date.

Advisor's Signature: _____ **Date:** _____
mm/dd/yyyy

AA Printed Name and Title: _____ **FGCU College:** _____