

## F-1/J-1 STUDENT PROGRAM EXTENSION REQUEST FORM

Students who require additional time to complete their academic program due to compelling academic or medical reasons must submit the completed form to ISSS in the semester in which their Form I-20 or DS-2019 ends, but no later than 3 weeks prior to their current program end date. Please submit the completed form together with the following support documentation (if applicable):

- Financial support documents that meet the criteria listed on the ISSS website at <http://iss.unc.edu/financials/>.
  - Students receiving department funding must submit the [Certification of University Funding](#) and an award letter.
  - All sponsor or parent/family funds must be accompanied by a sponsor letter or Affidavit of Support.
- Extensions due to documented illness must be accompanied by a signed letter from an MD, DO, or licensed clinical psychologist.

### STUDENT INFORMATION (COMPLETED BY STUDENT)

Name: \_\_\_\_\_ PID: \_\_\_\_\_

Immigration Status:    F-1        J-1    Email: \_\_\_\_\_    Phone: \_\_\_\_\_

Current Degree Level:    Bachelor's    Master's    Doctoral    Major/Dept.: \_\_\_\_\_

### ACADEMIC ADVISOR'S RECOMMENDATION (COMPLETED ONLY BY ACADEMIC ADVISOR)

**Instructions for the Academic Advisor:** F-1 and J-1 students are eligible for a program extension in cases of academic or medical *necessity*. Students may not extend their program for employment or professional development reasons. Your below recommendation will be used to determine eligibility per U.S. immigration regulations. For questions related to eligibility, please contact an [ISSS Student Advisor](#).

The student is making normal academic progress towards completing the degree program:    Yes        No

Beyond the student's current and past enrollment, s/he needs the following additional credits to complete their program:

**Coursework:** \_\_\_\_\_ credits        **Thesis/Dissertation (if applicable):** \_\_\_\_\_ credits

The student's expected final term of registration at UNC-Chapel Hill is: \_\_\_\_\_ (semester/year)

The student is expected to meet all degree requirements in the following term: \_\_\_\_\_ (semester/year)

**Graduate Students:** The student is expected to defend his/her thesis/dissertation on the following date: \_\_\_\_\_ (mm/dd/yyyy)

Reason for Program Extension (check all that apply):

- Delay due to documented illness
- Change/add major field of study
- Change in research topics
- Unexpected research problems
- Other compelling academic reason. Please explain (attach additional page(s), if necessary): \_\_\_\_\_

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Dept.: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_