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

ELIGIBILITY: An F-1/J-1 student in legal status who has been making normal progress toward completing the degree program, but unable to complete the course of study by the program completion date on current Form I-20/DS-2019 is eligible to apply for program extension. The delay must be caused by compelling academic or medical reasons, such as change of major or research topics, unexpected research problems, or documented illness. Delays caused by academic probation or suspension are not acceptable reasons for program extension. A new I-20/DS-2019 will be issued once program extension is approved.

DEADLINE: A minimum three (3) weeks BEFORE program completion date on current Form I-20/DS-2019, the program extension request must be submitted to OISS. SEVIS record closes automatically after the program completion date, making it not accessible for OISS to process program extension. A student whose I-20/DS-2019 expired before applying for program extension is out of status and must either file for reinstatement with USCIS or regain status through traveling abroad. Failure to timely file for program extension may result in losing eligibility for on-campus jobs, CPT and/or OPT.

LENGTH: A maximum of 12 months can be granted for each program extension request. If deemed necessary, a new request for future extension may be submitted following the same policy and procedure above.

Student Name: ___________________________________ SEVIS ID: N____________________
RUID: ___________________ Degree : ___________ Major: ________________________________

Program completion date on current I-20/DS-2019 ______/______/_______

Month/ Day / Year

New program completion date requested ______/______/_______

Month/ Day / Year

Explain the compelling academic or medical reasons that delay your completion of the program before the current completion date (Please read the “Eligibility” section above for reference):

______________________________________________________________________________

Do you have dependent(s) in F-2/J-2 status? □ Yes □ No

FINANCIAL SUPPORT: Proof of financial support must be provided to cover tuition and living expenses for the student and dependent(s), if applicable, for 12 months or for the entire requested extension period if shorter than one year, amount depending on degree level, major and actual tuition cost during the period of extension. For current funding requirement, check OISS website at http://www.ncas.rutgers.edu/proof-funding-form-i-20ds-2019

Sponsor/personal funding (attach official evidence of funding & sponsor agreement): $_____
Rutgers University funding (attach letter of assistantship, scholarship, job offer, etc): $_____
Dependent support: spouse $5,000; $3,750/child (attach official bank statement) $_____

Student Signature_________________________________________ Today’s Date__________________
ACADEMIC DEPARTMENT APPROVAL

The international student above is in F-1/J-1 visa status. His/Her visa document I-20/DS-2019 is expiring soon. In order to maintain legal status, the student needs to apply for program extension so as to obtain a new I-20/DS-2019.

F-1/J-1 regulations require that the student must be studying/researching full time, making normal progress toward completing the degree program and the delay of his/her degree completion is not caused by academic probation, separation, or suspension in order for the student to be eligible for program extension.

- Is the student in good academic standing?  _____ YES  _____ NO
- Has the student been studying/researching full time?  _____ YES  _____ NO
- How many credits has the student completed?  _____
- How many more credits will the student have to complete?  _____
- If graduate student, when did/will the student complete coursework?  _____/_____/_____
  Month/ Day /Year
- Is the student considered making normal progress towards completing the degree program?  _____YES  _____ NO
- What is the academic reason that this student has not completed his/her program in the normal allowable time? Please explain in details.
  __________________________________________________________________________
  __________________________________________________________________________
  __________________________________________________________________________
- What is the new expected completion date of this student’s program?  _____/_____/_____
  Month/ Day /Year
- Do you approve the student’s application for program extension?  _____ YES  _____ NO

Please sign where applicable:

Dissertation/Thesis Advisor Name_________________________ Signature __________________

Graduate Program Director/Advisor Name_____________________ Signature __________________

Undergraduate Academic Dean/Advisor Name_________________ Signature __________________

Today’s Date ________________________________