

Date of Signature

International Students & Scholars Office 328 O'Dowd Hall // Rochester, MI 48309-4428 Phone: 248.370.3358 // Fax: 248.370.3351 Web: https://www.oakland.edu/isso

F-1 Extension of Study 07/26/17

F-1 Extension of Study **Academic Advisor Recommendation**

To extend your SEVIS I-20 Program End Date:

- (1) Complete this application form: Obtain signature and current "Plan of Study" from academic advisor.

(To be Student ID Number: G00	SONAL INFORMATION c completed by the student Date: st Name: Student Phone #:	
Student ID Number: G00 LAST Name: Fir Student Email: Degree Level:	Date: st Name: Student Phone #:	
Student Email: Degree Level:	Student Phone #:	Middle Initial:
Degree Level:		
F-2 dependents who also need	Major:	
extended End Dates and new I-20s:		
X Student Signature		
FACU	LTY RECOMMENDATION	ON
(To be complet	ed by the Academic/Facu	lty Advisor)
Current Term Enrollment: Est. Comp	letion Date	Required Credit Hours Remaining:
(Ex: Fall 2017)	(Include term and year	(Excluding current term enrollm
Reason for delay (check all that apply):		
Change/add major field of study Unexpecte	d research problems	
Change in research topics Student new	eds more time due to the follo	owing compelling academic reason(s):
	, please contact an International St	of what constitutes acceptable academic reasons for extension) udent and Scholar Adviser at the ISSO at (248) 370-3358 s for the academic year of study for you and your dependants.
By signing this form, the Academic Advisor or Dep	partment Chair approves thi	s requests and recommends the I-20 extension.
X		@oakland.edu
Print Name of Academic Advisor/Department Chair	r Email	Extension