

An international student who has been maintaining status may apply for a program extension. Immigration regulations specifically allow for extensions when delays were caused by valid academic or medical reasons. Delays resulting from academic probation or suspension are not acceptable reasons. Students will be considered out of status if they: (1) do not extend their I-20/DS-2019 before the expiration date, OR (2) cannot complete their program of study by the I-20/DS-2019 expiration date and are ineligible for an extension. An international student who wishes to extend her/his I-20/DS-2019 must apply for a new form at least 30 days before the current document expires.

TO BE COMPLETED THE STUDENTS			
Last Name:		First Names:	
Date of Birth: (mm/dd/yyyy)		Student ID #:	
Telephone #:		Email:	
SEVIS #:		Current I-20 end date: (mm/dd/yyyy)	
Funding Source	<input type="checkbox"/> Self/Family <input type="checkbox"/> BSU Scholarship/Assistantship <input type="checkbox"/> Embassy Sponsor		
Student Signature: _____ Date: _____			

To obtain a new I-20/DS-2019 the following documentation must be submitted to OES: 1) a completed Program Extension, 2) Proof of financial support, 3) Copy of your current passport ID/expiration date page 4) For J-1 students: Proof of medical insurance

Student has been in and continues to be enrolled in a full course of study	<input type="checkbox"/> Yes	<input type="checkbox"/> No (please explain)
Student is making normal academic progress (has earned no more than three Fs)	<input type="checkbox"/> Yes	<input type="checkbox"/> No (please explain)

<p>Student has not completed their current program of study due to <i>(please check applicable reason)</i></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> Delay caused by a change in major of study <input type="checkbox"/> Delay caused by change in research topic <input type="checkbox"/> Delay caused by lost credits upon transfer to BSU <input type="checkbox"/> Delay caused by failure to pass required course(s) <input type="checkbox"/> Delay caused by medical issues <i>(student must provide proof)</i> <input type="checkbox"/> Original length of time given to complete studies was insufficient
<p>Anticipated Completion Date:</p>	<p><i>(mm/dd/yyyy)</i></p>	
<p>Advisor Name:</p>	<p>Advisor Signature:</p>	
<p>School/Department:</p>	<p>Email/Phone #:</p>	
<p>This form is only acceptable when received directly from the Academic Advisor / Department. Please email to internationaloffice@bowiestate.edu</p>		
<p style="text-align: center;">TO BE COMPLETED BY OES:</p> <p>Date Received: _____ <input type="checkbox"/> APPROVED</p> <p>P/DSO Name: _____ <input type="checkbox"/> DENIED</p> <p>Signature: _____</p>		