Recommendation for Extension of Program
Academic Advisor’s Form

Name of student: ___________________________________________ ID#: __________________________

Major: ___________________________________________________

Degree: ☐ Bachelor’s ☐ Master’s ☐ Doctorate ☐ Other: ____________________

Dear Academic Advisor:

The Department of Homeland Security requires a recommendation from the academic advisor for an extension of the student’s degree program. Immigration regulations allow an extension of program for “compelling academic or medical reasons” [8CFR § 214.2(f)(7)(iii)]. Below you will find several reasons that may apply to this student. Please indicate any or all that apply. If the categories do not fit, use “Other” and specify the circumstances. Please note that “probation” or “suspension” is not considered as adequate reasons to request an extension.

To the best of my ability to determine, the above-named student will need an extension to complete his/her degree for the following reason(s):

☐ Change of major.
☐ Change in research topic.
☐ Documented illnesses.
☐ Transferred from another institution resulting in the loss of some credits.
☐ Unexpected problems (due to no fault of the student)

Please specify:

☐ Other. Please specify:

New estimated date of graduation: ________________________________ Month/Year

Signature: ________________________________ Date: ________________

Name of Academic Advisor: ________________________________

Email: ________________________________ Phone: ____________________

If you have questions or need further information, please contact CIE at 974-3177.
This form may be returned by the student or by campus mail to Center for International Education, 1620 Melrose Avenue.

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