

Academic Advisor I-20/DS-2019 Extension of Stay Recommendation

F-1 or J-1 students whose I-20/DS-2019 will expire before they complete degree requirements must apply for an Extension of Stay. To be eligible for an Extension of Stay, they must be making normal progress toward completing a degree and be unable to complete their course of study by their expected graduation date due to compelling academic or medical issues. **If the student has completed all degree requirements then they are not eligible for an Extension.**

The following are not valid reasons for an I-20/DS-2019 Extension:

- To enroll in extra courses; to repeat the same course for personal interest; and/or to improve one's GPA
- To engage in non-required Curricular Practical Training (CPT)
- To enroll in course work delayed by participation in non-required CPT
- To complete degree requirements that do not require enrollment (i.e. comprehensive exam, finish pending coursework for an incomplete grade, etc.)
- To address delays due to academic probation or suspension

Before ISS can determine eligibility for an Extension of Stay, the student's academic advisor must complete the form below. **A completed Extension of Stay application must be submitted to ISS before the I-20/DS-2019 Program End Date.** Please contact International Student Services at 716-645-2258 or iss@buffalo.edu with any questions or concerns. Once completed, this form should be returned to the student so they can submit it to ISS.

Student's Name: _____ **Person #:** _____

Student's Current Degree Level (Bachelor's, Master's, Doctorate, etc.): _____

Student's Current I-20/DS-2019 Program End Date: _____ / _____ / _____

This student needs additional time to complete their academic program. As their academic advisor, I confirm that this student should complete degree requirements on:

_____ / _____ / _____ (Indicate the student's expected degree conferral date: 06/01/YYYY, 08/31/YYYY, or 02/01/YYYY.)

This student is making normal progress toward completing their degree, but has not yet completed their program of study due to (please check all that apply):

_____ **Change of major** from _____ to _____

_____ **Change in research topic** from _____ to _____

_____ **Unexpected research problems**

_____ **Documented illnesses or injuries** (Medical documentation must be submitted to ISS with this request.)

_____ **Adding a major which resulted in additional time needed to complete degree requirements**

_____ **Student failed a required course which resulted in additional time needed to complete degree requirements**

_____ **Student needs more time to complete degree requirements due to the following compelling academic or medical reason(s):**

Please indicate below the student’s academic plan for the program extension. If the student will complete a thesis, dissertation or capstone during extension, please list student’s expected milestones/goals, and their planned timeline/deadlines. A separate academic plan may be attached, if preferable.

TERM (Fall, Spring, Winter, Summer)	YEAR	COURSE NAME	NUMBER OF CREDITS

If the student will enroll for fewer than 12 credits during a Fall or Spring semester or fewer than 6 credits during summer (if summer is their final semester), appropriate actions must be taken to maintain full-time status. Please indicate below which option(s) will be utilized:

_____ Student will file for a Reduced Course load and I have signed the appropriate Reduced Course Load form

_____ Department will file for Full-Time Certification and the appropriate paperwork will be submitted to the Graduate School.

_____ Student has an Assistantship offer, will enroll for 9 credits, and appropriate paperwork was/will be submitted to Human Resources

I confirm that this student is making normal progress toward degree completion, is eligible to continue their studies and I recommend that this student receives additional time to complete their degree requirements:

Academic Advisor’s Name (please print): _____

Academic Advisor’s Signature: _____

Department: _____ Phone Number: _____

E-mail: _____ Date: _____

Application Submission Instructions – FOR THE STUDENT. To submit your complete I-20/DS-2019 Extension of Stay application, complete the e-form on [UB Global](#). For additional information refer to our [website](#). We recommend that you submit your application at least 10 business days before your I-20 Program End Date.