GRADUATE - REQUEST FOR SEVIS I-20 EXTENSION

This form is used to request an I-20 extension to complete degree requirements. A new SEVIS I-20 is necessary if the student is extending his/her program to a later date than the program end date listed on their current SEVIS I-20. This form can be submitted as early as 45 days before the program end date but cannot be submitted after the program end date has passed. Any missing information will result in a delay of processing.

This document is to be routed electronically via email by each office following the routing process below:

PART A: GENERAL INFORMATION - THIS SECTION TO BE COMPLETED BY THE STUDENT (please type or print clearly)

Name:		SEVIS ID:				
ULID:	_ Level:	Masters	Doctoral	Program:		
Student's signature:					Date:	

My signature above acknowledges that I understand that I am responsible for all estimated expenses on the form I-20 that are not covered by my assistantship, fellowship, or sponsoring agency. I certify that all information on this request form is true and correct. Students whose funding does not cover all costs must also complete the <u>Confidential Financial</u> <u>Information Form</u> and provide bank statements. Confidential Financial Information Form is not required for students who have assistantships/fellowships or scholarships that meet the <u>University's current financial requirements for graduate study</u>. Valid financial guarantee letter is required for sponsored students. Once this form is completed, the OIA will contact you if your funding does not meet the University's current financial requirements for graduate study and you can follow the instructions above to provide proof of additional funding.

to follow the instructions below.						
Graduate Student: Please email og	y"K-#uï02ø∕-`@	12	ĸ	this form your	Committee Cha	ir and ask them

PART B: ACADEMIC INFORMATION - THIS SECTION TO BE COMPLETED BY Tilden B(ON) THE TOQ C 22.40.2 Str B(ON) Section 10

PART B: ACADEMIC INFORMATION (CONT) THIS SECTION TO BE COMPLETED BY THEOMMITTEE CHAIR/ADVISOR

2. New projected graduation date: ____

_____ (Use <u>academiccalenda</u>* for commencement dat)e

MM/DD/**YY**

*Formultiple commencement days, use the first one list#dcommencement date is more than 1 year from current program end date, student will have to requestanother extension next year. If you have questions, please email oia@londsizdu or contact us at 337482-9028.

Committee Chair/Academic AdvisorName Committee Char/Academic AdvisorSignature Date

Committee Chair/Academic Advisor: Please email (forward original emails form to your departmenGraduate Coordinator.

PART C: FUTURE FUNDING THIS SECTION TO BE COMPLETED BY THE GRADUATE COORDINATOR.

1. Will this student continue to rec**€iu**redingfrom the departmenthroughhis/hergraduation date as listed this form?