

Extension of Stay Form

ATTENTION STUDENTS: Please return this form to the Office of Student Development & International programs with your Unofficial Transcript.

To be filled out by Student:

Student's Name: _____	
Last Name	First Name
CSUN ID #: _____	SEVIS Number: N_____
Major: _____	Graduation Date: _____

To be filled out by academic advisor: This form is provided for your convenience and is designed to facilitate the communication of certain information required by regulations of the US Bureau of Citizenship and Immigration Services (BCIS). Its completion is necessary for a foreign student in F-1 status to apply for an extension of the time limitation placed upon the student's current program of study. If you have any questions, please contact the Office of Student Development & International Programs at 818-677-3053. Thank you for your assistance.

A. Academic History:

Number of units required for degree: _____
Number of units completed: _____
Thesis/Project in progress (graduate students only): _____

DESCRIBE ANY ADDITIONAL REQUIREMENTS:

B. Current Status:

1. I anticipate that this student will complete all requirements for the current program of study on or about (mm/dd/yr) _____
2. This student has not yet completed the current program of study due to (please check all reasons that apply):

- Delays caused by lost credits upon transfer to our school
- Delays caused by change in major field of study.
- Delays caused by change in research topic (graduate students)
- Delays caused by unexpected research problems (graduate students)
- Other (please explain):

The student needs to extend his/her graduation date due to reasons beyond his/ her control. I therefore recommend that this student be allowed additional time for completion of studies.

Name & Title (please print): _____

Department (please print): _____ Phone #: _____

Advisor's Signature: _____ Date: _____