



ACADEMIC ADVISER'S RECOMMENDATION
FOR EXTENSION OF TIME FOR A PROGRAM OF STUDY

A. To be completed by student

- 1. DU Student/Banner ID #:
2. F-1 J-1 Other (please specify):
3. Family (Last) Name:
4. Given (First) Name:

Please make sure your addresses, phone number, and e-mail address are current in MyWeb!
Read the instructions on how to update MyWeb on our website: http://www.du.edu/intl/iss/address.htm

- 5. Current U.S. phone number:
6. E-mail address:

- 7. Educational Level:
Freshman Sophomore Junior Senior Masters Doctorate LLM JD
Certificate: what type?

- 8. Primary Major:
9. Secondary Major:

- 10. Current program end date indicated on I-20 (mm/dd/yy):

- 11. New date you plan to complete your program at DU (mm/dd/yy):

B. To be completed by Academic Advisor

The international student whose name appears above wishes to apply for an extension of the time allocated on his/her visa documents for completion of his/her program of study.

- 1. Number of credits remaining for completion of degree requirements: credits
2. Date expected to complete all degree requirements, including thesis/dissertation (mm/dd/yy):
Graduate students:
Date of completion for all coursework, excluding thesis/dissertation (mm/dd/yy):

- 4. This student has not yet completed the current program of study due to:
Delay caused by a change in major field of study
Delay caused by a change in research topic
Delay caused by unexpected research problems
Delay caused by documented illnesses
Other (must be a compelling academic or medical reason)

Student is making normal progress towards completing degree requirements: YES NO

NOTE: Delays caused by academic probation or suspension are not acceptable reasons for program extension.

- 5. Do you recommend this student be given additional time to continue his or her studies? Yes No

Advisor Signature: Printed Name: Date:

Department: Phone #: Email:

C. To be completed by the International Student Advisor at ISSS

Approved by International Student Advisor: Date