



### ELC PROGRAM EXTENSION REQUEST FORM

Section A: Student Information	
LAST (FAMILY) NAME in Passport:	FIRST NAME in Passport:
DATE OF BIRTH (mm/dd/yyyy)	DU ID Number:
I hereby authorize the release of any information necessary for this request and authorize any changes needed to complete my request.	
STUDENT SIGNATURE:	DATE:

ISSS sends all official communications, including important information about your immigration status, to your official @du.edu email address. It is important that you check this account regularly. For information regarding your DU e-mail, visit <http://www.du.edu/uts/helpdesk/docs/email.html>.

SECTION B: Financial Information
PLEASE SUBMIT FINANCIAL DOCUMENTS less than 12 months old to verify funds for the next 12 months (normal cost of ELC program is \$26,082 plus \$3,960 for each dependent). Exceptions may apply; please see an advisor for details.
Source of funds (in U.S. dollar amounts):
Student's Personal/Family funds: \$ _____
Funds from the University of Denver: \$ _____ What DU Dept(s)? _____
Funds from Another Source: \$ _____ Name of Sponsor: _____
\$ _____ Name of Sponsor: _____

SECTION C: Student Pick-Up Information
If all supporting information is accurate, documents will normally be prepared in 3-5 business days.
<input type="checkbox"/> I will pick up my documents myself.
<input type="checkbox"/> I cannot pick up my documents and have attached a Mailing or Third Party Pick Up Authorization Form with this request

SECTION D: To be completed by ELC Staff Member		
Current Level of Study: _____	Number of Levels remaining for completion of program: _____	Date expected to complete Program: (mm/dd/yy) ____/____/____
Prior to signing this recommendation, know that the information above is required to assure that the student's request for extension complies with Federal Regulations governing F-1 and J-1 immigration status. In signing this form I understand that my recommendation will be used for that purpose		
Printed Name:	Date:	
ELC Staff Member:		

FOR OFFICE USE ONLY		
Assigned To:	Processing Checklist:	Processing Notes
_____	<input type="checkbox"/> Enrollment checked by _____ <input type="checkbox"/> GA processed ____ / ____ / ____ <input type="checkbox"/> ISA processed ____ / ____ / ____	