

Request for Extension of Program



Office of International Affairs

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Students who are unable to complete their degree by the date indicated on their I-20 or DS-2019, may apply for an extension within the semester their documents expire. Students are eligible to apply for an extension if they have maintained their nonimmigrant status and have made normal progress toward completing their degree. The delay in completion must be caused by compelling academic or medical reasons. This form is designed to facilitate the communication of certain information required by regulations of the US Citizenship and Immigration Services.

Instructions

1. **Complete the Request for Program Extension** – Please have this form certified by the Dean of Advanced Research Programs. If the delay is due to medical reasons, attach documentation of illness or medical condition.
2. **Attach proof of financial support** – Proof of financial support must be provided for the first year of the new extension period or to the end of the extended period if shorter than one year. If your support will come from a source other than personal funds, please request an ATS Affidavit of Support form from the Manager of International Services.
3. **Return to the Coordinator of International Affairs**

Student Information - To be completed by Student

FIRST NAME

LAST NAME

ASBURY STUDENT ID NUMBER

CURRENT PROGRAM END DATE ON I-20 OR DS-2019 (MM/DD/YY)

Visa Type: F-1 J-1

Office of the Registrar - To be completed by Academic Advisor and the Registrar

1. **The student is engaged in the following academic program:**

MAJOR

DEGREE

2. **Please indicate the reason for program extension:**

A change in the major field of study

A change in the research topic

Unexpected research problems

Documented illness of the student (Please provide documentation from health professional)

3. **Please explain in detail the above reason for extension and how such reason caused the delay in program completion:**

4. Is this student currently working only on his/her dissertation? Yes No

5. Expected Degree Completion Date: *(not to exceed 12 months from current I-20 or DS-2019 end date)* _____

I certify that the student's delay in completion of the program is caused by compelling academic or medical reasons, and not fabricated to extend the stay in the U.S beyond Program End Date in I-20/or DS-2019 by extending the program duration. I have met with the student and we have secured a plan for the student to complete the program by the date above.

Dr. Lalsangkima Pachuau

ARP DEAN'S NAME

ARP DEAN'S SIGNATURE

DATE

Instruction to Request Extension of I-20/DS-2019

1. Please provide a written document to the dean of ARP providing the following:
 - a. In a few sentences, please describe the reason you need to extend your /I-20/DS-2019 (stay in the US)
 - b. Describe what chapters and what percentage of your dissertation you have completed.
 - c. How and when you anticipate completing the rest of your dissertation
2. Please send this document to dean of ARP and your mentor/advisor. Please ask your mentor to endorse your request, your works, and plan and to email that endorsement directly to the dean of ARP.
3. Please download the I-20/DS-2019 extension request form, fill out the portion to be completed by student, and email it to ARP office.
4. Please bear in mind that extension beyond the SEVP-certified duration of your degree program can only be granted if your reason is one of those accepted by SEVP (the extension request form lists the accepted reasons).