

## F-1 STUDENT PROGRAM EXTENSION FORM

Complete this form and submit it at least 30 business days before the end date on your current Form I-20 to OISS. Failure to apply for your I-20 extension before the expiration date means that you are no longer eligible for an extension. Extensions are granted for a **maximum** of one year at a time.

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Before submitting this form, student must:  Complete and attach an updated Statement of Financial Sponsorship form – found on the OISS website  Attach required financial statement or letters showing proof of coverage for the requested extension period								
In addition to the requirements listed above, <b>degree-seeking students</b> must also:  Meet with their Academic or Faculty Advisor and complete Section B (see page 2)								
SECTION A: TO BE COMPLETED BY THE STUDENT:								
Family N		ears on the passport and visa)	First Name:		HPU ID: @			
Non-HP	U Email:			Phone #:				
HPU Pro	ogram:			Degree Level:	UNDERGRADUATE	GRADUATE		
Student Eligibility Requirements for an F-1 Program Extension								
You must meet the following criteria in order to be eligible for a program extension:								
1.	You must be in valid F-1 status, having maintained a full course load each Fall and Spring semester enrolled at HPU							
2.	You must be able to demonstrate compelling academic or medical reasons that necessitate the extension of your I-20 (degree-seeking students) or have received approval from your home university (visiting students)							
3.	You must submit proof of financial coverage for the requested extension period (Statement of Financial Sponsorship and bank statements, funding letter, etc.)							
Students are <b>not eligible</b> for an F-1 program extension if any of the following applies:								
1.	1. You have satisfied all requirements for graduation/completion of your program							
2.	2. You require additional time to complete any withdrawn courses or courses graded as incomplete							
3.	3. You want to prolong your stay in the United States (degree-seeking students)							
4.	You fail to obta	ain an extension before t	ne completion da	te listed on you	r I-20			
By signing below, I verify that I have read and understood the eligibility for an F-1 student program extension. I agree and comply with the regulations above.								
Student's Signature:				_ Today's Date (mm/dd/yy):				

Degree-seeking students: Continue to page 2  $\rightarrow$ 



## THIS PAGE FOR DEGREE SEEKING STUDENTS ONLY

SECTION B: TO BE COMPLETED E FOR DEGREE-SEEKING STUDENTS ONLY		TY ADVISOR:			
Family Name:	First Name:	HPU ID: @			
(As appears on the passport a	and visa)				
Immigration Services (USCIS) will permit ou	ur office to extend a student's program	complete their academic program. U.S. Citizenship and completion date for compelling academic or medical reasons not acceptable reasons for a program extension.			
<ol><li>A student who has satisfied all purposes without taking action</li></ol>	to maintain status. Even if the school npleted all academic program requirem	n full-time academic standing.  tion of academic program cannot be enrolled for other continues to enroll the student (e.g. for administrative ents must apply for OPT, apply for a change of status, or			
Academic Advisor Verification					
	expected date of program completion nted for a maximum of one year at a time	n:			
2. How many additional credits are	e required for the student to complet	te their academic program:			
This student is in good standing and is make completed the current academic program as		the completion of their degree. The student has not			
☐ A change in academic program fro	om:	to			
	Documented medical illness – student must see OISS advisor for additional requirements				
A delay caused by unexpected res	A delay caused by unexpected research problems (thesis students only – please provide information on the status of student's thesis)				
Other – please explain or attach a	Other – please explain or attach additional documentation:				
Additional comments:					
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By signing below, I verify that this stude completion of their program.	dent is in good standing and is ma	king normal academic progress towards the			
Academic or Faculty Advisor Name:		Phone Number:			
Academic or Faculty Advisor Signature:		Today's Date:			