NORTHERN KENTUCKY UNIVERSITY
Office of International Students and Scholars

Academic Advisor's Recommendation for Extension of Time Limitation for a Program of Study

Student name:_____

Date CIS expects this student to complete studies (expiration date of I-20):_____

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Academic Advisor: This form is provided to facilitate the communication of certain information required by regulations of the U.S. Citizen and Immigration Service (CIS). Its completion is needed for a student in F-1 status to be granted an extension of the time of the student's current program of study. Any questions you may have can be directed to Adam Widanski at 572-6517. Please complete this form in full and return it to the Office of International Students and Scholars (OISS), University Center Room 405. Thank you for your assistance.

1. Has this student been continuously enrolled for a full course of study?
   ____ yes ____ no

2. This student will complete requirements for his/her current program on or about:
   _____ (month/date/year)

3. 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 lost credits upon transfer to our school.
   ___ Medical or academic circumstances that necessitate extension (please provide detailed explanation on reverse side of this form).
   ___ Other (please attach detailed letter).

I therefore recommend that this student be allowed additional time to complete studies.

Academic Advisor's signature:_____

Name and Title (please print):_____

Department:_____

Date:_____

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For Office use only: Date received from the advisor:
Comments: