

Student I-20 Request Form

Date: __/__/200__ SEVIS ID: N _____ CSU ID: _____

Name : _____
Last Middle First

Phone: _____ Email address: _____
Area code number

Graduate: _____ Undergraduate: _____ Department: _____

Please choose one:

I-20 Extension

- Attached (on the back) is a form to be filled by your academic advisor, as to why an extension is needed. The form must be completed by your academic advisor before your I-20 extension can be approved.

I-20 Change of Major

- Attach a notification copy of the new program of study

I-20 Change of Funding

- Attach documentation of the new funding source

Replace Lost I-20

Correct Current I-20

- Specify what corrections need to be made _____

Mail I-20 to: _____

I will Pick I-20 up in your office _____

*****Please allow 5 business days to process*****



Cleveland State University

F-1 Program Extension Academic Advisor Verification Form

This form is required to extend your I-20. Your academic advisor must complete and sign this entire form before an extension request can be approved by the Center for International Services and Programs. **Note: This form is required ONLY if your I-20 will expire and you need additional time to complete your program.**

Student's Name: _____

End Date of Current I-20: _____



Advisor's Name: _____

Department: _____

1. 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 compelling academic or medical reasons

Delay caused by a change in research topic

Delay caused by a unexpected research problems

No delay. The original length of time given to complete studies was not reasonable for an average student in this program.

Other (Please Explain) _____

2. When will this student actually complete his/her studies? _____

(mm/dd/yyyy)

I hereby recommend that this student be allowed additional time to complete his/her degree program at CSU

Advisor's Signature

Date

Phone Number