

Extension of Program Request for J-1 students

Office use only
 Initial _____
 Date _____
 ISRS _____
 SEVIS _____

A J-1 student is eligible for an extension if:

1. The student has obtained approval for an extension from his/her home institution,
2. The student has “continually maintained status,”
3. The student submits an extension application to CIS prior to the program end date listed on the DS-2019

How to apply:

Meet with a CIS advisor once you complete this Extension of Program Request form and obtain new financial documents for the amounts indicated below (see [Financial Documents Guidelines](#))

(<http://www.stcloudstate.edu/internationalstudents/students/scholarships/>)

- o Please review the [Cost](#) page on our website to on the amount you will need to show on your financials. (<http://www.stcloudstate.edu/internationaladmissions/costs/default.asp>)

Other reminders:

- o It is the student’s responsibility to obtain approval of the extension from their home institution
- o If living on campus, student must contact Residence Life about extending housing contract
- o Student will be charged for health insurance to cover the duration of the program extension

To be completed by the student:

Last Name _____ First Name _____
 Student ID # _____ Email _____
 Degree Level _____ Major _____

By signing below, I certify that the above information is true and correct to the best of my knowledge.

 (Signature) (Name – Please Print) (Date Signed)

To be completed by SCSU Academic Advisor:

Recommended new program end date: _____
 (Month/Day/Year)

As the academic advisor, I have reviewed the educational implications for this student and certify that the student is making normal progress towards his or her educational objective.

 (Signature from Academic Department) (Date Signed)

 (Name – Please Print) (Academic Department) (Phone)