

## **PROGRAM EXTENSION REQUEST FORM**

**DIRECTIONS:** Students please have your academic advisor fill out the following information in order for the MSU International Student Office to extend your I-20 Form for Program Extension.

**Student Completes:**

Student's Name (Please Print): \_\_\_\_\_  
(First Middle Last)

Student's e-mail address: : \_\_\_\_\_ Student's Tech ID#: \_\_\_\_\_

Student's SS#: \_\_\_\_\_

Student's Local Address: \_\_\_\_\_  
\_\_\_\_\_

Student's Local Phone Number: \_\_\_\_\_

Student's Current I-20 End Date: \_\_\_\_\_  
(Month Day Year)

1. Student's Major: \_\_\_\_\_

a) Department: \_\_\_\_\_

**Academic Advisor Completes:**

2. Total credit hours the student needs to complete his/her degree program: \_\_\_\_\_

3. Credit hours remaining to complete his/her degree program: \_\_\_\_\_

4. Academic reason for need of Program Extension: \_\_\_\_\_  
\_\_\_\_\_

5. Advisor recommended New End Date: \_\_\_\_\_  
(Month Day Year)

6. List course names yet to be completed:

<u>Name of Course</u>	<u>Course ID Number</u>	<u>Credit Hours</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Print Academic Advisor Name and Department Name

\_\_\_\_\_  
On-Campus Address

\_\_\_\_\_  
Signature of Academic Advisor

\_\_\_\_\_  
On-Campus Phone Number

\_\_\_\_\_  
Date this form signed by Academic Advisor

\_\_\_\_\_  
ISO Approval Signature Date

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-- ISO USE ONLY --

\_\_\_\_\_  
Entered new I-20 Ending Date into MnSCU/ISRS on \_\_\_\_\_