The International Center (IC) of Winthrop University  
Request Form for Extension to Complete Program Requirements

This form is to be used by continuing Winthrop international students to request an extension to their I-20 or DS-2019 form.

<table>
<thead>
<tr>
<th>Last Name (Family Name):</th>
<th>First Name:</th>
<th>Student ID (CWID):</th>
</tr>
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<tr>
<th>Degree Level:</th>
<th>Current Program Completion Date:</th>
<th>Projected Program Completion Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate (Bachelor's program)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduate (Master's program)</td>
<td></td>
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</tbody>
</table>

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<tr>
<th>Winthrop Email Address:</th>
<th>Current Major:</th>
<th>Current Academic Advisor:</th>
</tr>
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</table>

**Important Notes: Please read.**

- This request should be received by the Intl. Center at least 30 days prior to the expiration date of your current I-20 or DS-2019. If you fail to meet the deadline, there is no guarantee that your request will be processed before your current immigration document expires. This will have a negative impact on your immigration status.

- To be eligible for an extension, you must be maintaining status, making normal progress toward completion of a degree and have academic requirements remaining.

- Extensions may only be granted to students who can demonstrate that they have compelling academic or medical reasons.

- Delays caused by academic probation or suspension are not acceptable reasons for program extensions as per [8 CFR 214.2(f)(7)(iii)].

- Extension requests will not be granted solely due to delays caused by employment such as Curricular Practical Training.

**Checklist for required documents:**

- Completed Request Form for Extension to Complete Program Requirements;
- Completed Academic Advisor Recommendation Form;
- An unofficial transcript downloaded from Wingspan.

**By signing this form, I certify:**

- I have read the request form instructions and information in full.
- The information I have provided is, to the best of my knowledge, accurate.
- I (and any F2 dependents) must have Winthrop University approved health insurance for the duration of my F-1 status.
- I will report any address changes, current (U.S.) or permanent (out of the U.S.), through the International Center website within 10 days of the change.

Signature ___________________________________________  Date ____________________