

# I-20 Extension Request

11/20/24

*If handwritten, please write very clearly to avoid delays in processing.*

**Purpose:** To properly maintain status by extension of the student's program of study dates in SEVIS and to provide an updated form I-20 reflecting that extension, prior to original expiration and loss of status.

**Regulation:** 9 CFR214.2(f)7(iii)

## SECTION I: STUDENT INFO

Student's Family (Last) Name: \_\_\_\_\_ Given (First) Name \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Student ID #: 983 \_\_\_\_\_

MGA Email: \_\_\_\_\_@MGA.edu SEVIS #: N00 \_\_\_\_\_

Degree Level: Bachelors  Masters  Major: \_\_\_\_\_

## SECTION II: DETAILS OF EXTENSION REQUEST

What is the *current* program end date on your form I-20? \_\_\_\_\_  
(mm/dd/yyyy)

What is the *requested* program end date? \_\_\_\_\_  
(mm/dd/yyyy)

Briefly explain why you need an extension.

## SECTION III: ACADEMIC ADVISOR

*I am aware of the circumstances above, have reviewed the student's academic progress and standing, and I recommend an Extension of Status as indicated in section II above. I understand that an extension is not "elective" and may not be used to extend status. Valid reasons include academic circumstances, change of major, etc...*

Academic Advisor's Name: \_\_\_\_\_ Email: \_\_\_\_\_@mga.edu

Title: \_\_\_\_\_ MGA Phone: \_\_\_\_\_

The applicant has made academic progress towards their degree \_\_\_ Yes \_\_\_ No Student's GPA \_\_\_\_\_

Notes: \_\_\_\_\_

Academic Advisor's Signature: \_\_\_\_\_ Date of Signature: \_\_\_\_\_  
(mm/dd/yyyy)

**SECTION IV: FINANCIAL SUPPORT**

An extension of status requires proof of funding to cover estimated costs of tuition, fees, food, lodging and insurance during the extension. Please provide documentation of your financing below.

**\$30,014 USD for undergraduate / \$29,052 USD for graduate (USD = U.S. Dollar).**

INDICATE SOURCE OF SUPPORT	WRITE SPECIFIC AMOUNT IN USD (\$)
Personal Funds	
Personal Sponsor (parents, relatives, friend). Provide name, relation or relationship to you <u>in this space</u> .	
Government, Organization, Scholarship or Grant Funds. Please specify full written name of source <u>in this space</u> .	
If other, please specify <u>in this space</u> .	
<b>WRITE TOTAL AMOUNT OF SOURCES IN USD (\$)</b>	

**STUDENT: Please acknowledge the Statements Below.**

*I Understand...*

- I am responsible for my immigration status and knowing when it ends.
- I cannot request an extension after the program end date.
- The extension is only for the duration approved by ISS as recommended by your academic advisor.

**Student's Signature & Date:** \_\_\_\_\_

(mm/dd/yyyy)

**WHAT'S NEXT:**

Submit this form to **ISS@MGA.EDU**. You will receive email confirmation of your extension after review within 1-3 business days. Your status is only extended once we make changes in SEVIS based on the information above.