RECOMMENDATION FOR EXTENSION OF TIME FOR A PROGRAM OF STUDY

The above-named international student seeks an extension of time in the US to complete his/her degree program. US immigration regulations allow extensions under special circumstances. Please complete this form and return it to ISSS.

1. Has the student been continually enrolled full-time?  
   Yes □  No □

2. The student has not yet completed his/her current program of study due to (check all that apply):
   □ Delay caused by a change in major field of study
   □ Delay caused by a change in research topic
   □ Delay caused by unexpected research problems
   □ Delay caused by lost credits upon transfer to UAB
   □ The original length of time given to complete studies was unreasonable for an average student in this degree program
   □ Other (please explain)

____________________________________________________________________________

3. Is the student currently receiving a scholarship/GA/RA? Yes □ No □
   If yes, will the student continue to receive support during the extended time period? Yes □ No □

I recommend that this student’s period of stay in the U.S. be extended until ________________ (term/year) to allow additional time to complete his/her studies for the reason(s) indicated above.

Academic Advisor signature ______________________________________________________

(School of Public Health students must obtain Academic Dean’s signature)

Name and Title (please print) _____________________________________________________

Department (please print) _______________________________________________________

Date ____________________________

ISSS/Rec for Extension of Time
08/15/2016