

Academic Recommendation for Program Extension

Please complete sections 1, 2, and 3, then take this form to your Academic Advisor for review and signature. Note that if the end-date on your I-20 has already passed you **cannot** extend. You will need to apply for reinstatement instead. **Incomplete or unsigned forms will not be accepted**.

1. Please provide the following information:

» Your name:			
» Your Academic Advisor:			
2. Why do you need more time to finish your degree?	Please select ONE:		
□ I changed my major at Cambridge College			
\Box I have encountered unexpected problems with my Capst	one/ILP/IRP		
\Box I was injured/sick and had to take a Reduced Course Lo	ad		
\Box I missed one or more term of study due to Leave of Abse			
Other. Please explain in detail:	Term	Year	
3. When will you graduate?			
» I plan to complete all requirements for graduation in	,,,	Year .	
4. Please ask your Academic Advisor to review this ir	nformation and sign:		
» By signing, the student's Academic Advisor confirms both the program of study is as stated in Section 2, and b) the student graduation by the term and year specified in Section 3. Pleas incorrect or inaccurate.	should be able to complete his/	her requirements for	
Advisor's Signature		Date	
Advisor's Name (please print)	Telephone n	Telephone number/extension	
5. Please scan and email this form to the Internationa	al Student Office.		
For International Student Office use (don't fill this part out, pl	lease!):		
» I-20 extended to: » Extended by:	» Date:		
» Student notified of extension: \Box Yes \Box No \sim » Notif	fied via:		