

Advisor signature

Academic Advisor's Recommendation for Extension of Program of Study

International Programs and Services 200 Administration Building 1400 Townsend Drive Houghton, Michigan 49931-1295 Tel: (906) 487-2160 Email: ips@mtu.edu

This information is required by the IPS Office to grant an extension of a student immigration status to an international student. The student's academic advisor must complete and sign the form. This form can be emailed to International Programs and Services (IPS).

To be Completed By Student		
Student's Name		MTU ID# M
Expiration date of current form I-20 or DS-2019	MTU E-mail	
Have you requested a program extension in the past?	Yes	No
To be Completed	By Academic Adv	visor
 This student has not yet completed the current program o 	f study due to (che	eck all that apply):
Delay caused by a change in major field of study. In what	semester did the o	change occur?
Delay caused by a change in research topic In what sem	ester did the chan	ge occur?
Delay caused by unexpected research problems. <i>Please a</i>	ttach a brief descri	iption of the problems encountered.
Delay caused by lost credits upon transfer to Michigan Te	ch.	
Delay caused by academic or language difficulty. <i>Please a</i>	ttach a brief descri	iption of the problems encountered.
Illness or Medical condition (medical documentation requ	ıired; academic ad ^ı	visor approval not required)
Other		
Extension requests will not be granted solely because the stuc Curricular Practical Training. 2. According to the academic advisor recommendation, the st program no later than (i.e., what is the new program end date	tudent will comple	te the requirements of his/her current
	ons may only be granted for up to 1 year per request.	
recommend that this student be allowed additional time to o	complete their pro	gram at Michigan Tech.
Academic Advisor's Name (please print):		
Department (please print):		Date: