

EXTENSION OF PROGRAM

(EXTENSION OF I-20)

In order to maintain F-1 student status with the United States Citizenship and Immigration Services (USCIS), International students are expected to complete their studies in a given time as shown on their Form I-20. If you are unable to do so, you must request for an extension of your I-20. This is called Extension of Program (EOP). USCIS must receive your program extension notification from IPS BEFORE the completion date in item #5 of your I-20.

Submit the following documents to the IPA Office when applying for an Extension of program:

- Your current original SJSU I-20
- Obtain a letter from your major advisor indicating how much longer is required for you to complete your program. This letter should include a specific estimated date of completion and units remaining to complete. Letter must be on SJSU department letterhead.
- Updated documentation of your financial support (for at least 12 months). Proof of financial documentation must be a letter from the bank (original document). Monthly statement and print out from the web will not be accepted.
- A completed I-20 request from (attached)

All the above documents must be submitted to the IPS Office before your current I-20 expires and before the Extension of Program can be processed.

IPS processing time is at least 2-3 weeks.



REQUEST FORM FOR I-20 EXTENSION

Family Name (Surname): First Name (Given):
(The same name as appears on your passport) (do not use middle name)

Country of birth: Date of birth (month/day/year):

Country of citizenship:

Level of education pursuing or will pursue at SJSU [check only one]

- Bachelor's
Master's
2nd Bachelor's
Other

Major:

Expected completion date of studies:

During your studies at SJSU, please indicate your means of financial support [for 12 months].

For Bachelor's = \$21,710.00
For Master's = \$20,151.00
Each dependent = \$5,000.00

- a. Student's personal funds:
b. Funds from another source: specify type/source:
c. Funds from this school: specify type/source:

Total: \$

F-2 Dependent Information:

Family Name Given Name: Date of Birth: Country of Birth:

- Spouse
Child
Child

For IPS Advisor To Complete

Reason for extension:

Remarks/Notes: