

Academic Advisor's Recommendation for J-1 Student's Extension of Stay

To the Academic Advisor: This form requests information which is required by U.S. immigration regulations. Completion of this form is necessary for a student in J-1 status to request an extension of the time allotted to complete his/her current program of study. *Please contact International Student and Scholar Services at 645-2258 if you have any questions pertaining to this form or Extension of Stay procedures.*

Student's Name: _____ **Person #** _____ - _____

Please complete this form and return it to the student or to ISSS, 210 Talbert Hall:

1. Has the student been continuously enrolled in a full course of study? (i.e. 12 credit hours per semester or 9 credit hours plus an assistantship, or certified full-time by the Graduate School?) _____ Yes _____ No

2. The student needs more time to complete his/her program. As his/her academic advisor, I confirm that this student should complete degree program requirements on or about _____ / _____ / _____.

3. This student has not yet completed the current program of study due to (please check all reasons that apply):
 - a. ___ Delay caused by **change of major field of study** from _____ to _____

 - b. ___ Delay caused by **change in research topic** from _____ to _____

 - c. ___ Delay caused by **unexpected research problems**

 - d. ___ Delay caused by **lost credits upon transfer** to the University at Buffalo

 - e. ___ Documented illnesses or injuries

 - f. ___ Other. Please explain: _____

I therefore recommend that this student be allowed additional time to complete his/her program of study.

Name and Title (please print): _____

Academic Advisor's Signature: _____

Department: _____ Date: _____

Phone Number: _____ E-mail: _____

