

Program Extension Request For College Program F-1 Students

Updated on 10/30/2008

Student to Complete:					
Last/Family name/Surname:		First name:	Mid	ldle name:	
EdCC Student ID nu	ımber:	Date:			
Current address in the	ne U.S.:				
	D 1/4	demic Advisor to Comp			
information required international student	ed for your convenience and by regulations of the U.S. of whose name appears above her program of study at Edo	is designed to facilitate Citizenship and Immigra wishes to apply for an e	the communication Services extension of the	(CIS). The F-1 te time allocated	
Majordegree program is:	ged in the following academic	the remaining			or the
	red to complete program of some normal progress towards				□No
□ Delay caus □ Delay caus □ No unusua average st	yet completed the current peed by a change in major field sed by lost credits upon transful delay. The original length udent in this program.	ld of study sfer to our school of time given to complet	-		
Print Name:		Signature: _			
Office/Department:		Title:		Date:	
Phone Number:		E-mail:			
FOR ISS OFFICE	USE ONLY				
Front Office Staff: ISS Advisor:	Received by: New I-20 issued by:			base Update:	