

OFFICE OF
International Education

Please Return To OIE:
Office of International Education
Marquette University
Holthusen Hall, 4th floor
P.O. Box 1881
Milwaukee, WI 53201

APPLICATION TO EXTEND STAY AS AN F-1 VISA STUDENT

Section I: To be completed by the student

Student name (Last/Family, First) _____ MUID _____

Level of Study: _____ College/Department: _____

Current program completion date as indicated on student's Form I-20 _____ (MM/DD/YY)

Student Signature: _____ Date: _____ (MM/DD/YY)

Section II: To be completed by academic/thesis advisor

You must confirm/provide all of the information below before OIE can extend the program completion date for this student:

Yes No

1. This student has been making normal progress toward completing their educational objective

This student's need for an extension is not the result of academic probation or suspension

This delay results from a compelling academic or medical reason like changes of major/research topic, research problems, or documented illness.

List the specific compelling academic or medical reason(s) that requires the extension. Please note that "more time" is not a compelling academic reason.

2. List the remaining degree requirements and corresponding completion dates. (Note: Student may only be less than full-time in their final term of studies and only with prior notification to OIE):

Academic Requirements

Completion Date

3. List the new expected graduation date: _____ (MM/YY)

4. I certify that as the student's Department Chair or official Academic/Thesis Advisor, I have completed this form, and believe the student has a valid academic reason for requesting an extension to their program:

Name _____ Phone _____

Signature _____ Date _____

Please contact an OIE advisor at 414-288-7289 if you have any questions about this form or the extension process.

For OIE use only:

Passport expiration date _____

Financial verification received: Student _____ Dependent _____

Copy to Compliance Coordinator _____