



The State University of New York Maritime College

ACADEMIC ADVISOR'S RECOMMENDATION FOR F-1 STUDENT'S PROGRAM OF STUDY EXTENSION

This form is to be filled out by the Academic Advisor ONLY. An international student who is making regular progress towards his or her degree, but is unable to complete his or her program of study by the expected completion date noted on item #5 of the Form I-20, must apply for extension of program of study. By filling out the form below, you will help International Student Services determine the student's eligibility for such an extension.

Student Name: _____, _____
(Please print) Last First

Student ID Number: _____ Level of Study: Undergraduate
 Graduate

Field of Study: _____

After reviewing the student's academic record, I anticipate that the student will complete his/her academic program requirements on or about: ____/____/____

The student has not yet completed his/her program requirements due to the following reason(s):

- ____ Change of major (change must have been declared with the Registrar's Office)
- ____ Change in research topic
- ____ Unexpected research problems
- ____ Lost credits upon transfer to our school
- ____ Medical condition (documentation of illness or injury from treating physician is required)
- ____ Other (please explain) _____

I therefore recommend that the student be approved for additional time to complete the program of study.

Advisor's Signature

Advisor's Name & Title (Please print)

Department

E-mail

Phone

____/____/____
Today's Date