



This request is for an international student that requires additional time for the completion of his/her program of study, the student must complete Part I on the Program Extension Request and have Part II & III completed by the academic department.

1. Once you have completed this form, you must log in to the OGS Program Extension e-form available [Here](#). The e-form will require you to upload the completed form and financial documents which demonstrate that you have access to funds that will cover the expenses you will incur during the additional term(s) needed to complete your program.
2. The extension of your I-20 or DS-2019 will depend on eligibility. If your request is incomplete, it will be denied and you will be required to resubmit the e-form.
3. The OGS requires at least 10 business days to process your request.

Important: The program extension request must be submitted **at least 30 days prior to your current I-20 or DS-2019 end date.**



Part I: Student Information (To be completed by the student)

Student Name: Last name _____ First name _____ Northeastern ID: _____

Major: _____ Number of credits for the extended duration : _____ hour(s)

Remaining courses to be taken during extension: _____

Part II: Verification by Academic Department (To be completed by the student's academic advisor or Graduate Program Director)

❖ Please check one of the following to ensure the student's eligibility to request a program extension:

This student has maintained full-time academic status during the regular academic terms and has been making satisfactory progress toward the successful completion of his/her program.

This student could not maintain full-time status during the regular academic terms for the following Reason(s): _____

❖ Please choose one of the following reason(s) for the extension request:

Change of major - the term when change of major was approved: _____

Thesis/Dissertation Continuation _____

Co-op/Internship (If checked, please indicate which of the below reasons is correct. Please note: The Office of Global Services will only authorize CPT in the final semester if the student's degree program requires them to enroll in a course that requires CPT in order to graduate, or if the student will be concurrently enrolled in additional courses that are required in order to graduate).

Student has a remaining co-op or internship that is a requirement for their program

Student has program requirements remaining as a result of a prior co-op/internship

Medical - A Medical Leave must have been granted by the University Health & Counseling Services (UHCS)

Other - specify reasons: _____

Date of New Program Completion:

Semester Based Programs

- Fall (December 20)
- Spring (May 8)
- Summer I (July 2)
- Summer II & Full Summer (_____)
- Other: _____ (i.e. Law school, thesis/dissertation)

Quarter Based Programs

- Fall (December 19)
- Winter (April 3)
- Spring (July 3)
- Summer(_____)

Program Completion Year: _____

Part III: Signatures (To be completed by the student's academic department)

1. Academic Advisor or Graduate Program Director (required):

To the best of my knowledge, the information pertaining to this student is accurate and complete.

Print Name & Title: _____

Signature & Date: _____

2. SEVIS contact: required for Graduate students and all CPS students (if Academic Advisor is different from SEVIS contact).

To the best of my knowledge, the information pertaining to this student is accurate and complete.

Print Name & Title: _____

Signature & Date: _____ College/Graduate School: _____