

PROGRAM EXTENSION REQUEST FORM

I. STUDENT INFORMATION *(To be completed by student.)*

Name: _____ RUID: _____

Email: _____ Phone: _____

Major/Area of Study: _____ Degree Level: Bachelor's Master's Doctoral

Current program end date (as listed on I-20) _____
(MM/DD/YYYY)

Have you already applied for graduation? Yes[†] No

Have you applied for and been granted an extension during your current program? Yes* No

PhD Students/Candidates: Have you been in your PhD program more than five (5) years? Yes* No

[†] Please contact the appropriate academic dean/graduate program director regarding your graduation deferral.

*Additional explanation from academic official of compelling academic reason for extension is required.

Signature: _____ Date: _____

II. STATEMENT OF FINANCIAL ABILITY *(To be completed by student.)*

Indicate the funding sources used to support you and your dependents (check all that apply):

Personal / Family Funds ATTACH documentation of financial ability (such as bank statements less than 6 months old) which covers the expenses for the duration of your extension.

Department Funding (RA or TA appointment) ATTACH a letter from the funding department which includes salary and tuition waiver amounts, as well as the length of the appointment.

NOTE: Graduate student funding may not cover all student expenses and will not cover the expenses of your dependent(s). Please indicate an additional source of funding beyond your RA/TA appointment that will cover any remaining expenses.

Government Funding ATTACH a letter which details the source, amount and duration of the funding.

**For years 2020-2021, graduate students must show \$56,000USD and undergraduates must show \$52,000USD. An additional \$5,000 for spouse and \$3,750 per child should also be shown.*

I certify that I will be responsible each additional semester of study Rutgers University–Camden, including expenses associated with my dependents.

Signature: _____ Date: _____

III. ACADEMIC INFORMATION (To be completed by academic advisor, dean or graduate director.)

Student's field of study: _____ Degree Level: _____

The student experienced a delay in his or her program due to the following reason:

- Change in major or field of study
- Change in research topic or unexpected research problems
- Inadequate time on original immigration document to complete program requirements
- Medical condition
- Other compelling academic reason

Please provide additional details regarding the student's request for a program extension:

The student has been and continues to make normal academic progress in his/her academic program.

- Yes No

Student is expected to complete his/her program by: _____
(MM/YYYY)

If the student has already applied for graduation, has been in his/her PhD program for more than five (5) years (indicated in section I), or has already received a program extension, please provide additional information below describing the compelling academic reason for an extension. Extensions will not be granted for the sole purpose of applying for CPT employment or to continue an assistantship.

IV. SIGNED CERTIFICATION & CONTACT INFORMATION FROM ACADEMIC OFFICIAL

I have reviewed the information noted on this entire form and I certify that all information provided is accurate to the best of my knowledge and judgment.

Name/Title: _____ Department: _____

Email: _____ Phone: _____

Signature: _____ Date: _____