



CAYUGA
COMMUNITY COLLEGE

OFFICE OF ADMISSIONS

197 FRANKLIN STREET, AUBURN NY 103021

11 RIVER GLENN DRIVE, FULTON NY 13069

**EXTENSION OF STAY RECOMMENDATION FORM:
TO BEGIN A NEW PROGRAM OF STUDY**

The information requested is needed to comply with U.S. federal immigration regulations governing F-1 Students. The international student named below is applying for an extension of the time limitation placed on the current program of study. **This completed form should be completed in full, by the student's Academic Advisor or Department Chairperson, and returned via email, to the Office of Admissions (admissions@cayuga-cc.edu).**

Section #1 - To be completed by the student:

Student Name: _____
(Please print) Last/Family, First/Given, Middle

Credential Sought: ___ Associate's Degree ___ Certificate

Current Program of Study: _____

New Program of Study: _____

Student ID Number: _____ College E-Mail Address: _____

Phone Number: _____

Student's Signature Date _____

Current (Local) Address:

Permanent Address in Home Country:

Please explain the reason(s) for the delay in completing your academic program, which make it necessary for you to apply for an Extension of your Form I-20:

(Turn to Page #2)

Section #2 – To be completed by the Student's Academic Advisor or Department Chairperson:

This student's new Program of Study will commence at the start of the: Fall 20____ Spring 20____
Summer 20____ term.

If this student successfully completes any and all required coursework, and meets any and all academic requirements, I anticipate that this student's new Program of Study will be complete, when official degree certification is completed at the conclusion of the: Fall 20____ Spring 20____
Summer 20____ term.

Academic Advisor or
Department Chairperson's Signature

Name & Title (please print)

Department (please print)

Telephone #

Section #3 - For Admissions Use Only:

Office of Admissions Action & Date: _____ Initials: _____

Entered in SEVIS (Date): _____

Student notified via e-mail (Date): _____