

**EXTENSION OF STAY FOR F-1 AND J-1 STUDENTS  
ACADEMIC ADVISOR'S RECOMMENDATION FORM  
BINGHAMTON UNIVERSITY  
INTERNATIONAL STUDENT AND SCHOLAR SERVICES**

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**STUDENT COMPLETES THIS SECTION:**

Student Name: \_\_\_\_\_ B Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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**ACADEMIC ADVISOR/GRADUATE ADVISOR/MAJOR PROFESSOR COMPLETES THIS SECTION:**

**PLEASE NOTE:** An international student in F-1 or J-1 status who is making satisfactory degree progress, but is unable to complete his or her course of study by the program end date listed on their I-20/DS-2019, must apply for an Extension of Stay. By completing this form, you will assist in determining the student's eligibility for an extension of stay.

Student's **NEW** expected graduation date: Fall 20\_\_\_\_ Spring 20\_\_\_\_ Summer 20\_\_\_\_ Winter 20\_\_\_\_ (Undergraduate Only)

Number of credits student will register for during the extension period:

Fall \_\_\_\_ Spring \_\_\_\_ Summer \_\_\_\_ Winter \_\_\_\_ (Undergraduate Only)

Student's Degree Level: \_\_\_\_ Bachelor's \_\_\_\_ Master's \_\_\_\_ Doctorate

Student's Field of Study: \_\_\_\_\_

The student has not yet completed the current program of study due to **(please check all that apply)**:

- \_\_\_\_\_ Delays caused by a change in academic major **\*Change of major must be declared with Student Records\***
- \_\_\_\_\_ Delays caused by a change in research topic
- \_\_\_\_\_ Delays caused by unexpected research problems
- \_\_\_\_\_ Delays caused by lost credits upon transfer to our school
- \_\_\_\_\_ Delays caused by medical condition (official documentation from treating physician required)
- \_\_\_\_\_ Other (please specify): \_\_\_\_\_

Is the student making satisfactory degree progress: \_\_\_\_\_ Yes \_\_\_\_\_ No

If this is **NOT** the student's first extension request, please explain in detail how the student is making satisfactory degree progress and why an additional extension of stay is needed:

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Based on the above information, I recommend this student receive additional time to complete degree requirements:

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Department

\_\_\_\_\_  
Telephone

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

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**To Submit Application:** Login to <https://is.binghamton.edu/>. Click on the blue "LOGIN" button on the left side of the screen and enter your PODS username and password. Click on "Academic Services" and then "Extension of Stay Request".