



Program Extension Application

F-1 Students

F-1 students must complete their program of study by the end date on their Form I-20. A student who will not complete the academic program by that date must submit this completed form and proof of financial support to the Registrar's Office before the program end date. You should submit all materials at least one month before the program end date.

Eligibility

An F-1 student is eligible for an extension of stay if:

1. The student applies to the Registrar's Office at Notre Dame Seminary for the extension before their program end date
2. The student has "continually maintained status" (the terms and conditions of their VISA); and
3. NDS can certify that the delay in completion is "caused by compelling academic or medical reasons, such as changes of major or research topics, unexpected research problems, or documented illnesses"

An F-1 student is not eligible to apply for a program extension if:

1. The delay was caused by academic probation or suspension;
2. The completion date on the Form I-20 has expired;
3. The student has not maintained valid F-1 status; or
4. The student does not otherwise meet the eligibility requirements stated above.

If a student fails to apply for extension before the end date on their Form I-20, or cannot meet the eligibility criteria for program extension, then the student is considered out of status and not eligible for an extension. The student will need to either apply for reinstatement or exit the U.S. and apply for admission with a new I-20 with new SEVIS ID for initial attendance. Failure to apply for an extension on time may result in an inability to participate in Optional Practical Training (OPT) after graduation.

Application Procedure

You must apply for an extension **before** the program end date on your Form I-20. If you plan to travel outside the United States, you must apply for an extension prior to your departure.

To apply, provide the following completed documents to the Registrar:

1. Academic Advisor/Academic Dean's Recommendation for Extension (Page 2)
2. Declaration and Certification of Finances (Pages 3-6)
3. Supporting financial documents for your source of funds (See Page 4)



Department Recommendation for Extension

Requires signature of Academic Advisor **and** Academic Dean

Student Name: _____

Program end date on current I-20: _____

Academic Advisor /Academic Dean: This form and the following form are provided to facilitate the communication of certain information required by regulations of the [U. S. Citizenship and Immigration Services \(USCIS\)](#). Its completion is required for a student in F-1 status to be granted an extension of the time limitation placed by the USCIS upon the student's current program of study. Any questions you may have can be directed to the Registrar's Office at 504-866-7426 ext. 103 or registrar@nds.edu. **Both the student's academic advisor and the academic dean's signature are required.**

1. Has this student been continuously enrolled for a full course of study? Yes No

2. Student will complete requirements for his current program on or about: _____ (m/d/y)

Note: extensions can only be granted for a maximum of one academic year. If additional time is needed, another request for extension must be submitted prior to the end of any current extension.

3. This student has not yet completed the current program of study due to (please check all reasons which apply):

Delay caused by a change in major field of study.

Delay caused by a change in research topic

Delay caused by unexpected research problems

Delay caused by lost credits upon transfer to our school

Documented illnesses

No unusual delay. The original length of time given to complete studies was not reasonable for an average student in this program.

Other (please attach an explanatory letter to this application)

I therefore recommend that this student be allowed additional time to complete studies. Department

(please print): _____

Academic Advisor's name and title (please print): _____

Academic Advisor's signature: _____ Date: _____

Academic Dean's name (please print): _____

Academic Dean's signature: _____ Date: _____



Declaration and Certification of Finances for Program Extension

Estimated living expenses: Please indicate the appropriate amount below. Current estimates are provided by Undergraduate Admissions/OGPS. If supporting F-2 dependents in the U.S., an additional \$5,000 for a spouse and \$3,000 for each child per year must be included:

	<i>Semester</i>	<i>Year</i>
<i>Graduate</i>	<input type="checkbox"/> \$11,070	<input type="checkbox"/> \$22,140

Other Costs Please itemize - _____

Total cost of extension (attendance and living expenses): \$ _____

Name and title of department representative: _____

Signature: _____ Date: _____

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Section 5: Self-Funding Applicants

To be completed by the applicant if the applicant is funding his own expenses:

I declare that I will provide \$_____ in funding per year in U.S. dollars.
If supporting dependents, \$5,000 for spouse and \$3,000 for each child must be included.

Include supporting documentation (e.g., copies of bank certifications, account statements, etc.) dated with the last 6 months for each source of funds. Provide copies, not original documents.

If you are self-funding, you can skip Section 6 and continue on to Section 7

Section 6: Guarantor/Sponsor Funding

To be completed by the guarantor or company sponsor, if funding the applicant's expenses.
You may scan and email this page to your guarantor/sponsor for them to sign, and they may scan their signed page and email it to you.

Guarantor/sponsor's name: _____

Mailing address: _____

I declare that I am willing and able to maintain and support the named applicant and that I am prepared to make an advance deposit with the university, if required, to guarantee that the student will not become delinquent in resolving financial obligations to the university.

I have not submitted an affidavit of support for any other individual(s) studying in the United States. (If you have, please attach a sheet listing the name of the individual, the college or university to which the affidavit was submitted, and the approximate date of submission.)

I declare that I will furnish funding for the applicant named in Section 3 as indicated below:

Amount of funding in U.S. dollars: _____

Funding will be awarded as follows (indicate if lump sum, quarterly, yearly, etc.): _____

Funding will be available for the duration of the program or: _____

Guarantor's signature: _____ Date: _____

Notre Dame Seminary
Graduate School of Theology
2901 S. Carrollton Avenue
New Orleans, Louisiana 70118-4391
504.866.7426 Fax: 504.866.3119



Section 7: Affidavit of Funding

I understand that tuition and fees are payable at the beginning of each semester and that failure to pay fees due the university may result in loss of registration privileges.

The source of funding for the program extension is listed above (includes self or family sponsor, or a non-family sponsor such as an employer, scholarship program, or governmental agency

I certify that this information is accurate and complete and understand that the inclusion of false information is grounds for dismissal from the university. I attest by my signature that it is factually correct and honestly presented.

Applicant's signature: _____

Date: _____