

Program Extension Request Form for Fall 2024 - Summer 2025

	SECTION I TO BE	COMPLETED E	3Y T	HE STUDE	NT	_
Last Name:		First Name: _				
Student ID #:						
I-20/SEVIS #: (Top, left corner on the I-20 starting with N00.)		Program listed	on t	the I-20:		
		Program end o	date	on the I-20: _		
Have y	ou requested a program extension before at M0	CC? (circle)	Υe	∋s	No	
1. 2. 3.	lity: Program extension applicants are required Be in lawful F-1 status. Making normal academic progress. Possess an unexpired passport. Be in good academic standing as listed in MC	:C's Catalog unde	r Sta	andards of Ac	cademic Progress (SAP).	
	Minimum requirements for good academic	standing				
	Attempted graded courses 1000-level and at	bove (credit hour	s)	Minimum cur	mulative GPA	
	1.0-29.5			1.5		
	30.0-79.5			1.75		
	80.0+			2.0		
	Note: If students pass ESL or developmental or credit hours, but they will not have a GPA.	·		J	,	
5.	Note that the CFR 214.2(f)(7)(iii) states that "I	Delays caused by	aca	ademic probat	tion or suspension are not	
	acceptable reasons for program extensions." Be enrolled full-time or have prior authorization Provide a Financial Affidavit and an official bar shows funding for the extension in U.S. dollars	nk statement or le				
Proces	<u> </u>	-				
	Connect with a Counselor, Academic Advisor, complete Section II of this form.	_				
	Email this form, your educational plan, Financiss@mccneb.edu.					
3.	ISS will review your request. If it is approved, I	ISS will provide yo	ou w	ith a new I-20	0 to sign and date electronically	•
	stand the eligibility requirements and process a d only for a maximum of one year. If I need more					е

Date: _____



Program Extension Request Form for Fall 2024 - Summer 2025

SECTION II – TO BE COMPLETED BY A COUNSELOR, ACADEMIC ADVISOR, SUCCESS NAVIGATOR, OR THE COORDINATOR OF ISS

F-1 students have expiration dates on their I-20/SEVIS records to complete their programs at MCC. If they will not complete the program by the expiration date, they may request an extension before the date. ISS will determine if an extension is approved or not. ISS is a paperless office. Please save this form as a PDF.

- 1. Complete the info below.
- 2. Please verify that the program listed on page one is the same or very similar to the program listed in RGPE. Do not the change RGPE. Instead, inform the student that s/he needs to change the I-20 first to the current major in SEVIS by completing the Change of Educational Level/Major form located on the ISS Forms and Directions website.
- 3. Create an educational plan in Student Planning with the F-1 student and note the info below. Email the education plan and all pages of this form to iss@mccneb.edu (or to the student to email to ISS). Screenshots/Word Docs are fine.
 - a. The student needs to have all tests results, such as the math test results, in order to complete the ed plan.
 - b. Include all prerequisite classes in the plan.
 - c. Not all classes are offered each quarter. Use "Enrollment Summary" in My Way or XCSS in Colleague to forecast.
 - d. It is important that the class formats are considered in the plan. The student may only count one online or remote class towards full time enrollment each quarter. Hybrid and blended courses are considered as on campus courses.
 - e. The student may request a vacation quarter through ISS after three consecutive quarters. ISS may consider the time a student was enrolled at another institution if there was no significant break before the transfer. Type "Vacation Pending ISS Approval" for a particular quarter in the Notes section and email a screenshot of the notes to iss@mccneb.edu or to the student to email to ISS.
 - f. If the student plans to be enrolled part time in the final quarter, the student needs to submit a completed Reduced Course Load form to ISS. The student cannot take only online or remote classes in the last quarter. S/He has to have an on campus, hybrid, blended, or an on campus independent study class.
 - g. Include info in Notes and in STRK.

Na	me:	
Ph	one #:	MCC E-mail:
Stu	ıdent's P	rogram: Anticipated Completion Date (MM/DD/YYYY):
		the academic reason for delay of program completion? Check all that apply.
		Change in program (not from ESL to a certificate of achievement or associate's degree) Previous program:
		Current program:
		Date of change:
		Studies interrupted by medical conditions. The student must have medical documentation on file with ISS.
		Student needed prereq. or dev'l classes (not ESL) before taking college level courses. Please list courses:
		Other compelling academic reason. (Very rarely approved.)
В.	Did the	student take classes outside the program and count the credits towards full time enrollment?
C.	Was the	e student ever on academic probation or suspension per CRI?
D.	accept	note that the CFR 214.2(f)(7)(iii) states that "Delays caused by academic probation or suspension are no able reasons for program extensions." Is the delay for completing the program due to a probation or sion presently or in the past?
Sic	inature:	Date:



Program Extension Request Form for Fall 2024 - Summer 2025

SECTION III - TO BE COMPLETED BY ISS

See advisor's answers above and check the box indicating that you reviewed these requirements:

	Look at page one to see if the student has requested an extension before at MCC. If so, locate the past program extension form to see if there are comments regarding the student needing another extension. If the past program
	extension had an end date with no notes about needing another extension, ask the student why s/he didn't finish
	according to the educational plan that the advisor made with the student last time.
	Review if "Other" is marked as a reason for the extension in Section II, determine if the reason is a valid compelling reason. Consult with the PDSO.
	Review if the student took classes outside the program and count the credits towards FT. If yes, the student most likely will not be eligible.
	Review if "Vacation Pending ISS Approval" is noted in the educational plan. If yes, look up XAPX to see if the student would most likely be approved. If not, then the student needs to meet with a Counselor, Academic Advisor, Enrollment Navigator, or the Coor of ISS to revise the plan.
	Review if the student is or has been on probation or suspension and the poor grades are the reason for the extension request. If yes, then the student is not eligible.
If th	ne student requested the extension before the program end date and is approved, please follow these steps:
	Check to see if the SEVIS record is active, not terminated, cancelled or completed.
	If the extension is based on medical conditions, see if there were approved RCLs in the SEVIS record.
	Update SACP w/ correct dates for the extension
	Update NIIS form purpose, start/end dates, and financial info, if necessary
	STRK Notes
	Remove any related holds in PERC
	Update Financial Info in SEVIS and update the number of months, if applicable.
	Click on "Extend Program" & include reason
	The I-20's new expiration date is:
	(The extension can be up to one calendar year. If the student needs more time, then s/he will need to submit another extension and financial documentation.)
	E-sign the I-20. Email the I-20 to the student. Instruct the student to sign and date the I-20 and return all three pages
	in a PDF to iss@mccneb.edu.
	Upload <u>all</u> documents in Etrieve, including the I-20 that is not yet signed by the student. When ISS receives the signed
	I-20 from the student, then the I-20 will be uploaded in Etrieve.
In a	accordance with 8 CFR 214.2(f)(7)(iii)-(iv), the request for an extension was:
	Approved Denied Reason:
P/E	OSO Initials & Date: Comments:



Financial Affidavit for a Program Extension for Fall 2022 – Summer 2023

Please follow the directions listed below. International Student Services (ISS) will review your application after receiving all the financial documents.

- 1. Complete all sections.
- 2. Provide a supporting official bank letter or statement:
 - a. in English
 - b. stamped or signed by a bank official
 - c. in US currency
 - d. dated within six months from the date of submission
 - e. in a savings or checking account. ISS cannot accept money markets, investments, or letters from employers about salaries

F-1 students are required to enroll in a minimum of 12 credit hours each quarter, except for authorized reduced course loads or vacation quarters.

Estimated expenses based on the number of quarters for the extension:

Estimated expenses based on the number of quarters for the extension:				
	1 Quarter	2 Quarters	3 or 4 Quarters	
Tuition and fees	\$1,320	\$2,640	\$3,960	
Books/Supplies	\$ 500	\$1,000	\$1,500	
Room/Board	\$3,573	\$7,146	\$10,719	
Estimated Personal Expenses &	\$ 790	\$1,580	\$2,370	
Transportation				
Sub total	\$6,183	\$12,366	\$15,102	
Health Insurance (two quarters)	\$723.25	\$1446.50		
Health Insurance (four quarters)			\$2,893	
TOTAL	\$6,906.25	\$13,812.50	\$21,442	
Amount per dependent	\$1,345	\$2,690	\$5,380	

Tuition and fees are charged at \$110.00 per credit hour. 12 credit hours cost \$1320 for one quarter.

F-1 students with F-2 dependents coming to the U.S. are required to demonstrate additional support in the amount of \$5,380 for each dependent. Add the amount to the estimated total listed above.

Section 1. Applicant Information (to be filled by the applicant)					
Αļ	oplicant's Name:				
Sı	ırname/Last/Family	First/Given		Middle	
Lis	st all F-2 dependents that will accomp	pany you to the United States:			
	imily Name	Given Name	Date of Birth (mm/dd/yyyy)	Relationship	
1.					
2					
۷.					
3.					
S	ection 2. Statement of Financi	ial Support (to be filled by t	he <u>applicant</u>)		
	nancial support from all sources mus companying dependents. Please list		e chart plus add	itional funding for	
•	Applicant's Personal Funds		9	S	
	Please write the amount of support	and provide supporting bank o	document		
•	Funds from Family and Friends Please write the amount of support		(\$	
	Please write the amount of support	and provide supporting bank o	document		
	Name of sponsor	Relations	hip to student _		
•	Funds from other sources (government)	nent, organization or other age	ency)\$	j	
	Name of agency Please write the amount of suppo				
	Please write the amount of support the amount of funding.	ort and provide a signed lett	er from the age	ency specifying	
T	OTAL (Must match the "Estimated To	otal" amount listed in page one	e) \$		

Section 3. Verification of Finance	ial Support (to be fi	lled by the applicant)			
I,	the first year of my eall of the information my financial circums	ducation at MCC, incomprovided on this form tances. I am fully aw	n is correct and complete;		
Applicant's signature:			Date:		
Section 4. (A and B) Verification you are your own sponsor)	of Financial Suppo	ort (to be filled by the	financial sponsor – even i		
A Are you financially supporting a	any other MCC stude	ents? Yes⊟ or No⊏	1		
A. Are you financially supporting any other MCC students? Yes□ or No□ If yes, please list the other MCC students you are supporting:					
MCC ID number	Last name	First/Given	Middle		
B. I (we) the undersigned certify the educational and living expense and that I (we) are submitting be	s for the entire lengt	h of study at Metropo	olitan Community College		
Sponsor's Name (please print)	Signatu	ure	Month/Day/Year		
Address	State/F	Province	Postal Code		
Home Phone	Cell Ph	none	E-mail Address		