

Recommendation for Extension of Visa Document

THIS SECTION COMPLETED BY STUDENT

(Please note that graduates should have their form filled out by their GPD and undergraduates should have theirs filled out by their department's Chief Departmental Advisor.)

Name _____ UIN _____

First

Middle

Last

SEVIS IDN _____ I-20/DS2019 Expiration _____ Student Email: _____@odu.edu

Degree: Bachelors Masters Doctorate Program/Major _____

OTHER REQUIRED DOCUMENTS:

1. Submitted I-20/DS2019 request on the VISA web site? Yes No

1) The degree program requires _____ credits of all program participants. Student has earned _____ credits to date.

2) Formal coursework has been completed: | Yes | No

3) Expected semester and year of program completion: | ^ μ u u CE _____ | & o o ^ % o CE] v P _____

4) Is this student making normal progress towards his/her current degree? | Yes | No

Comments, if any:

5) Do you recommend this student be given additional time to continue his/her studies? Yes | No

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