

## Extension of Stay/Program Academic Advisor's Recommendation Letter

### **Students:**

Submit this completed form to the OISS with a **copy of your Program of Study (graduate students) or u.achieve audit (undergraduates)** at least **2 weeks BEFORE** the end date of your latest I-20/DS-2019.

**Graduate students-** please work with your academic advisor to obtain your Program of Study.

**Undergraduate students-** go to your my.emich account to print your u.achieve audit (follow Student tab- Student Records-UG Degree Audit (u.achieve)- Choose "printer friendly" on right side of screen).

Your Program of Study or audit should reflect the information below and show how many more classes you need to complete your degree.

### **Must be completed by Academic Advisor or Medical Professional:**

Date: \_\_\_\_\_

Student's Name \_\_\_\_\_ E \_\_\_\_\_

This is to certify that \_\_\_\_\_ is currently a student in good standing at Eastern Michigan University. He/she has made normal progress toward completing a \_\_\_\_\_ degree in \_\_\_\_\_. However, he/she is unable to complete all requirements for the degree by \_\_\_\_\_ and is requesting an extension until \_\_\_\_\_ because of compelling academic (or medical) reasons. As his/her academic advisor (medical professional), I recommend this extension due to the reason below:

**Mandatory:** Please briefly explain reason for extension

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\_\_\_\_\_  
Advisor/Medical Professional Name (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

Circle One: Academic Advisor OR Medical Professional