

J-1 STUDENT DS-2019 EXTENSION

DS-2019 Extension requests must be submitted online at least 3 weeks <u>before</u> your current DS-2019 end date.

Family / Last Name:(as appears on passport)	Given Name: (as appears on passport)		
UCLA ID#:	SEVIS ID#: N	SEVIS ID#: N Country of	
Major:	Country of		
Email:	Telephone:		
Degree Objective: Bachelo	or's Master's Doo	ctorate Exchange	
APPLICATION CHECKLIST			
Completed J-1 STUDENT DS-20 signed by your Student Affairs Of	19 EXTENSION request form (all items must fficer or Academic Counselor)	be filled in and the form must be	
	Statement — funding amount must cover tuit se refer to the Dashew Center website for fun		
	if using personal and / or family funds, funding arket / investment accounts is not accepted).	must be from checking / savings	
TO BE COMPLETED BY ACADEM	IC DEPARTMENT (Student Affairs Officer	·/ Academic Counselor)	
The above student's new expected deg	ree or program completion date will be:		
Month Day	Quarter / Year: Year		
The above-named student needs addition	ional time to complete their degree requiremen	nts due to the following reason:	
Change of major Change	e in research topic Needs more tir	me to complete thesis / dissertation	
Other (please explain):			
Name of Student Affairs Officer / Academic Counselor		of Student Affairs Officer / ademic Counselor	
School / Department	Phone / Extension	Date	