Confirmation of Plan to Shorten Academic Program Form

If you will complete all program requirements before the end date listed on page 1 of your Form I-20, use this form to request a revision to your program end date.

Please print the following information:

**Student Name:** ____________________________________________________________

**CC ID:** ____________________________________________________________

**Major:** ____________________________________________ **Minor:** ________________________________

**Current Program End Date on I-20:** ________________________________

**New Completion Date:** ________________________________________________

**Note:** When you shorten your F-1 program, your end of studies timeline and post-completion work authorization timeline are also shifted to an earlier date. Your eligibility for on-campus employment ends on your Form I-20 program end date so shortening your program end date will impact your on-campus work eligibility. Shortening your program to an earlier end date is final and cannot be reversed without a complete extension application.

**Recommendation of Academic Advisor:** This student is requesting a change to the completion date estimated for his or her current program of study. This form is to certify that the student has discussed this plan with their academic advisor. Please complete the following information and return this form to ISSS at your earliest convenience.

**New Expected Date of Completion (mm/dd/yyyy):** __________/________/________

**Advisor’s Name (print):** __________________________________________________________

**Department:** __________________________________________________________

**Email:** __________________________________________________________

**Signature:** __________________________________________________________

**Date:** __________________________________________________________