

International Student
Request for ~~20~~ Extension
AEP Student

Complete Part 1 on this form and then submit the form to your AEP Adviser for recommendation. ~~Submit the form to your AEP Adviser for recommendation.~~
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International Student
Request for 20 Extension
AEP Student

Today's Date: _____

Part 1: About the Student

Surname (Last Name) _____ Given Name (First Name): _____

Student ID Number: L00 SEVIS Number: N00

UNA Email: _____ Phone Number: _____

Local Address: _____

Please fill in the table below for the current term

Classes	Level	Grade	Attendance
Speaking			
Grammar			
Reading			
Listening			
Writing			

Why is this extension needed? Please mention any academic, personal or medical issues that have affected your work in any term
You may attached any documentation that you have to support your answer.

Part 2: Advisor Comments

Earliest Possible AEP Completion Date _____