

AYA Student Extension Form (Fall to Spring)



Student Name: _____ I.D.# _____
(First Name) (Last Name)

Start of Original Program Year: AUG 20____

Local Coordinator: _____ State: _____

Any student who wishes to extend his or her stay in the U.S. on the Academic Year in America Program must fill out this form. Students, host parents, natural parents and high school administrators must sign in the appropriate area.

In order for the extension to be considered, this form must be received in the AYA office no later than December 5. All extension requests are subject to approval by AYA. Local coordinators will be notified by telephone if the extension is granted and confirmation will be sent to overseas partners. When all signatures have been obtained, please fax this form back to your Student Support Specialist at: 203-724-1536

Please sign below to indicate you are in agreement that the above-mentioned student is permitted to extend his/her stay on the Academic Year in America program for the remainder of the current school year.

High School Approval:

(High School Name) (High School Administrator Name) (High School Administrator Title)

High School Administrator Signature: _____ Date _____

Host Family Approval:

Host Parent Signature: _____ Date _____
(Host father or mother)

Natural Family Approval:

Natural Parent Signature: _____ Date _____
(Natural father or mother)

Local Coordinator Approval:

Local Coordinator Signature: _____ Date _____

Student Signature: _____ Date _____