



Mission: To inspire lifelong learning and leadership through experience, excellence, and innovation.

Vision: Transforming the future through innovative learning.

Values: We value learner success, integrity, respect, community, excellence and innovation.

STUDY PERMIT OR VISA EXTENSION LETTER REQUEST

Lakeland College complies with the *Freedom of Information and Protection of Privacy Act* of Alberta. Information collected on this form is collected under the authority of Section 33(c) of the Act for the administration of study permits or visa extension letters. This information is used in the normal course of College operations in accordance with this legislation. If you have any questions about the collection and use of this information, please contact the FOIP Coordinator (780-853-8524; FOIP@lakelandcollege.ca).

Note: Extension letters can only be issued if your current study permit or visa expires within 120 days of your request.

- Complete the top section of the form.
- Ask your academic advisor or program chair to complete the bottom section.
- When both sections are complete, drop the form off with your international student support coordinator in student services, or email it to international@lakelandcollege.ca
- Please allow a minimum of 5 working days before you receive the extension letter. You'll receive the letter by email, unless you click the box to pick up your letter in student services.

For the student to complete:

PERSONAL INFORMATION

Last Name	First Name	Middle Name	LC Student ID#
Former Name	Home Phone #	Other Phone #	D.O.B. YYYY-MM-DD
Email Address			

PROGRAM INFORMATION

Name of Program	Campus Attended	Years of Attendance YYYY-YYYY
-----------------	-----------------	-------------------------------

CURRENT STUDY PERMIT INFORMATION

Expiry Date YYYY-MM-DD

PICK UP A COPY IN STUDENT SERVICES?

Yes No

AUTHORIZATION

Signature	Date
-----------	------

For Academic Advisor or Program Chair only:

PROGRAM INFORMATION

Name of Program	Number of Courses Remaining	Expected Date (Term End) of Completion
-----------------	-----------------------------	--

AUTHORIZATION

Signature	Date
-----------	------