

# EXTENSION REQUEST

**Directions:** Please complete this form and attach necessary pages. Obtain required signatures. Send completed request to [approvals@grd.msu.edu](mailto:approvals@grd.msu.edu).

**Notes:** Time extensions are generally expected to be requested prior to the deadline expiration. A second extension is usually not granted.

- Extension Request for:**
- Completion of EdS
  - Completion of EdS Comprehensive Examination
  - Completion of EdD
  - Completion of EdD Comprehensive Examination

**Requested Extension End Date or Semester:** \_\_\_\_\_

## STUDENT INFORMATION

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**FTU Routing Slip:** \_\_\_\_\_ **Dept:** \_\_\_\_\_

**Academic Advisor:** \_\_\_\_\_

**Have you previously requested an extension?**  Yes  No **Was it approved?**  Yes  No

**Please answer the following questions and provide any supporting documentation.**

1. What is the student's current standing in the program?
2. If the student's program time limit has already expired, why are you making this request post deadline?
3. Provide a detailed explanation as to why the student did not meet the program deadline. Have circumstances changed to meet the new deadline if an extension is granted?
4. Provide a detailed timeline of completion including all intermediate steps anticipated: when will each of the remaining benchmarks be complete (date, month, or semester & year). This timeline should include an acknowledgement that second extensions beyond the timeline are generally not granted, and must be signed by the student and major advisor.
5. If you are requesting an extension for the completion of a PhD and are also requesting that the student is not required to re-take comprehensive exams, please provide an explanation.
6. Please include in your request all 999 override request beyond 45 credits as needed.
7. Attach copies of the student's last two years of annual reviews.

## REQUIRED SIGNATURES

\_\_\_\_\_  
Dept. Chair (or designee)

\_\_\_\_\_  
Date

## APPROVALS

\_\_\_\_\_  
Associate Dean (or designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean of the Graduate School (or designee)

\_\_\_\_\_  
Date