

Extension to Time Limits for Graduate Degree Completion Request Form

[Catalog Reference](#)

Student Name:

95# or NetID:

UVM Email address:

Date:

Graduate Program:

Degree:

Semester/Year graduate studies began:

Planned date of completion (semester/year):

Below, or on a separate attachment, please include the reason(s) for requesting an extension to the time to degree as well as a detailed outline and timeline for completion of all outstanding degree requirements. This plan should include impact on student funding, milestone benchmarks, and frequency of check-in.

I have met with my primary advisor and graduate program coordinator. Both endorse request for an extension provided I follow this detailed timeline/plan for degree completion.

Student Signature:

Date:

Approvals:

Advisor:

Date:

Program Coordinator/Director:

Date:



Submit completed form to: gradcoll@uvm.edu

Dean of the Graduate College (or delegate):

Date:

Approved

Denied