

REQUEST FOR AN EXTENSION OF TIME TO FINISH THE MASTER'S DEGREE

University of Wisconsin - Stevens Point

Current Graduate School policy states that all credit accepted toward a degree, including transfer credit, must have been earned within a seven-year period (which starts when you finish the first class approved for your program). No extensions will be granted except for unusual health conditions, fulfillment of military obligations, or other extenuating circumstances beyond the reasonable control of the student.

This request should be completed and submitted to the Dean of Graduate Studies one semester prior to the expiration of the seven-year time period.

**To be completed by the Applicant
(Please print or type)**

NAME: _____ ADDRESS: _____
 (Address should be where you want the completed form to be returned.) _____

DEGREE SOUGHT: Master of _____ Program/Emphasis _____

LIST ALL OF THE COURSES TAKEN WHICH WILL APPLY TOWARD THE DEGREE:

| Course title & number | # of credits | College or University | Date taken | Grade received |
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Date of Admission as "Graduate Regular" to Master's Program..... _____
Date of Admission to Candidacy..... _____
Original scheduled date of graduation (7-year limit)..... _____
Requesting an extension of time through..... _____

Month/year

EXPLAIN WHY THE DEGREE REQUIREMENTS WILL NOT BE MET WITHIN THE SEVEN-YEAR LIMIT. WHY SHOULD THE EXTENSION BE GRANTED?

To be Completed by the Department
(Please print or type)

RECOMMENDATION AND COMMENTS OF (a) Graduate Advisor or Graduate Committee Member, and (b) Graduate Coordinator or Department Chair.

SIGNATURES and PROCESSING

Graduate Advisor or Committee Member _____
Signature date

Graduate Coordinator or Department Chair _____
Signature date

College Dean _____
Signature date

Action of the Graduate Council Chair _____
Signature date

___ Approve extension until _____
___ Request Denied date

COMMENTS:

Approved/Denied by the Graduate Council _____
Date

cc: Student
Graduate Coordinator
File