

MARQUETTE UNIVERSITY GRADUATE SCHOOL

REQUEST FOR EXTENSION OF TIME

The Graduate School does not automatically extend the time you may need to finish your degree. You must attach a statement explaining why an extension is necessary. You are solely responsible for obtaining the signatures of your graduate adviser and department director of graduate study (or departmental chair if the director is unavailable) and submitting the completed form to the Graduate School. The Graduate School will also review your request and may override your department's recommendation.

Print *legibly* in ink. If you omit information or signatures, use pencil, or if we cannot read what is written, the Graduate School will return the unapproved form to you. As soon as the Graduate School approves or rejects your extension, you will be notified at the address you provide on this form.

Student Information

Name: _____	Adviser: _____	MUID: _____
Address: _____ _____	Program: _____	Currently Enrolled: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Start Date: _____	Telephone #: _____
This is my: <input type="checkbox"/> first request <input type="checkbox"/> second request <input type="checkbox"/> third request		
<input type="checkbox"/> Doctorate (circle one): Ed.D. Ph.D. <input type="checkbox"/> Master's (circle one): Thesis Project Essay Course Work		

Degree Requirements - Fill in the date the requirement was, or will be, completed.

Language Requirements (if any):	
Completion of all Course Work:	
Comprehensive or Doctoral Qualifying Examination:	

Dissertation or Thesis/Project Details - Indicate planned completion dates or substitute appropriate chapter titles. Doctoral students must complete all of the sections below. If you are a master's student, fill in those sections that best apply to your thesis or project.

Outline:	
Statement of Problem:	
Literature Review (or appropriate chapter - give title):	
Methodology (or appropriate chapter - give title):	
Results (or appropriate chapter - give title):	
Conclusions:	
Public Defense (if necessary for master's):	
Revision, if required by committee:	
Approved dissertation, thesis or professional project, essay, to the Graduate School:	

Additional Information and Signatures

New Anticipated Graduation Date: _____	
Student Signature: _____	Date: _____
Adviser's Signature: _____	Date: _____
Director of Graduate Studies/ Department Chair's Signature: _____	Date: _____

For Graduate School Use Only:

This student now has until _____ to complete all remaining degree requirements.

Graduate School Approval: _____ Date: _____

Comments: _____