Request for Extension of Time to Complete Degree Requirements

NYU TANDON SCHOOL OF ENGINEERING

Graduate Academics

INSTRUCTIONS:

1. This form may be filed by graduate students with satisfactory academic standing in a degree program.
2. NYU Tandon SOE's regulations require that Master's degree students complete their requirements within **5** years of beginning graduate studies at NYU Tandon SOE. Full-time Doctoral degree students must complete all degree requirements within **6** years of initiation of graduate work at NYU Tandon SOE (**12** years for part-time students).
3. Applicants file this form with the Office of the Associate Dean for Graduate Academics after recommendation and approval of the departmental adviser.

STUDENT INFORMATION:

First Name _____ Last Name _____ N _____ Univ. ID#

E-mail Address _____ Telephone Number _____ Net ID _____

Academic Home Department _____ Degree/Program _____

List the courses you plan to take in each semester going forward. At least one course is required per semester:

Semester	Year	Course #	Course Title

Thesis/Dissertation topic _____

Thesis/Dissertation Adviser's Name: _____ Date admitted to graduate school: _____

Cumulative Grade Point Average (GPA): _____

NYU Tandon SOE's regulations regarding the maximum time permitted for degree completion block my graduation in the near future. On the basis of my past record, which I believe is good, I request some modification of the rules which would make possible my graduation in approximate accordance with the above plans.

Please attach a letter from your Thesis/Dissertation Adviser (or Academic Adviser if not doing a thesis/dissertation) describing the reason(s) for your request.

Date _____ Student's Signature _____

STUDENTS: DO NOT WRITE BELOW THIS LINE

ADMINISTRATIVE ACTION

Comments:

Department supports extension until: _____
Semester & Year

Departmental Adviser's Name _____ Signature _____ Date _____

☐ Approved through: _____
Semester & Year

☐ Denied

Comments:

Racquel Cooper/Joseph Anderson
Graduate Academics Representative _____ Signature _____ Date _____