



Graduate School of Arts and Sciences  
 Enrolled Student Office  
 P.O. Box 400772  
 Charlottesville, VA 22904-4773  
<http://graduate.as.virginia.edu/>  
[gsasregistrar@virginia.edu](mailto:gsasregistrar@virginia.edu)

### Request for an Extension of Time Limit for Degree Completion

This form is required for graduate students intending to enroll as a full-time graduate student beyond their **allowed** time to degree:  
 (Doctoral- 7 years, Master's 5 years)

**Student Information**

Last Name  First Name  University/SIS ID   
 Degree  Department  Student E-mail   
 Extension requested through:  Fall  Spring  Summer Year  Planned Enrollment:  Off-Grounds  
 On-Grounds  
 Attach required documentation:  
 Statement of progress during the previous two terms  
 Detailed academic plan (month-by-month) for the period of the proposed extension indicating when remaining components of the dissertation or thesis will be completed

**Advisor Information**

Last Name  First Name  UVA Email ID   
 I have reviewed all written material cited by this student as progress during the previous two terms.  
 This student exhibits a commitment to full-time dissertation research and writing.  
 This student's academic plan for the period of the extension is appropriate and feasible.  
 Comments   
 \_\_\_\_\_ Date   
 Advisor Signature

**Director of Graduate Studies (DGS) Information**

Last Name  First Name  UVA Email ID   
 The graduate faculty in our program support this request for an extension of time to complete the degree.  
 \_\_\_\_\_ Date   
 DGS Signature

**GSAS OFFICIAL USE ONLY**

Semester Admitted  First Semester of PhD  Beginning Academic Level  Ph.D.  
 Masters  
 Has the student had any breaks in enrollment?  NO  
 Yes List Semesters in which Student was not enrolled:   
 Total Years Student has been working toward obtaining a degree (Excluding Years of Leave):   
 Number of Previous Extensions  Last Approved Extension Date   
 Extension Approved Through  Fall  Spring  Summer Year   
 Extension Denied  
 Dean Comments   
 \_\_\_\_\_ Date   
 Signature of Associate or Assistant Dean for the Graduate School of Arts and Sciences
