

**Extension of Time for Degree Request****Registrar's Office**

This form is used to request an extension of time beyond the university's established time limits for degree completion. Extension requests must be approved by the student's advisor and the Dean or Director of the student's school. Students who have requested three or more extensions are subject to an intensive reevaluation of their transcript and progress to degree. Students who incur an excessive number of extensions and who do not make progress toward their degrees are subject to dismissal or other academic action. For additional information, see the Bulletin at <http://bulletin.cgu.edu>.

**Student Information**

CGU ID# 254 - \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Academic Department \_\_\_\_\_ Degree Program \_\_\_\_\_

Semester and year I began my program \_\_\_\_\_

Semester/year my current time limit expires \_\_\_\_\_ Number of Previous Extensions \_\_\_\_\_

First extensions may be granted for up to two years. Subsequent extensions may be for no longer than one year.

Extension Requested through the end of Semester \_\_\_\_\_ Year \_\_\_\_\_

I have attached a **proposed plan of study/research** and hereby request that my time for degree be extended. I plan to graduate by the semester and year indicated above. I agree to abide by degree completion deadlines published in the Academic Calendar for my new graduation semester and file my Intent to Receive a Degree when required.

**For students with three or more previous extensions:** I understand that my academic record must be reviewed by my department/program to ensure that my completed work to date is consistent with requirements relevant for my degree in my new expected graduation term. I agree to complete any additional coursework determined necessary for completion of my degree requirements. I further acknowledge and accept responsibility for any additional financial costs incurred by this extension of my time to degree.

Approval by your department for additional time at CGU does not automatically approve you for federal aid. Federal regulations require a separate review by the Financial Aid Office for the purpose of receiving federal aid. For more information, please see the [Satisfactory Academic Progress](#) policy.

This form does not serve as authorization for enrollment in courses. Attach a [Registration \(Add/Drop\) Form](#) or complete registration via the [MyCGU portal](#) once the extension is processed. Please allow time for processing of approved form. **Students are responsible for payment of any late registration fees added to their student account while extension requests are processed.** See the [Academic Calendar](#) for applicable deadlines.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Department/Program Approvals**

By signing below we certify this student's plan of study/research and extension request has been reviewed and approved. Our signatures below further certify that If the number of previous extensions is three or more, this student's record has been verified and completed coursework and other qualifications have been determined relevant for conferral of the degree in the student's new requested graduation semester.

Faculty Advisor \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Dean/Director Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Dept. Review \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Submit Completed Form to Registrar's Office**

FOR INTERNAL USE

#REG022 1/18

Approved through (Semester/Year) \_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_

Copy to International Student Office \_\_\_\_\_