



Request for a Time Extension

Graduate students may request a time extension for a maximum of one year per request. Master's and certificate students should submit a request to re-validate any courses that will be more than five years old at the time of graduation.

Student's Full Name (Last, First, Middle) Student ID Number Today's Date

Street Address Graduate Program

City, State, Zip Degree Sought Month & Year Started

Student's Telephone Student's UMD Email Address

Length of Extension: one semester one year

Advance to Candidacy date: _____ (doctoral students only)

Student's Plan of Action During Extension Period	Completion Date

By signing here, I affirm that I have read the policies (go.umd.edu/gs-time-extension) and understand the impact on registration, funding, loans, student accounts, housing, and visa status (for international students).

Student Signature Date

By signing below, I approve the student's Plan of Action and support a request for time extension.

Primary Advisor Name Signature Date Phone Extension UMD Email Address

Program Director Name Signature Date Phone Extension UMD Email Address

Graduate School:

Approval

Graduate School Reviewer Signature Date Denial: _____