

Petition for Extension of Time to Complete PhD Requirements

Please note that this form is only for extending a student's degree program, and approval of this form is not an extension of funding. Please send all completed forms to grsrec@bu.edu.

Name: _____

Program: Please select

BU ID #: _____

Advisor: _____

Academic Information

Date entered program: _____

Date coursework completed: _____

Date of Qualifying Exam: _____

Date of Language Exam(s): _____
(if applicable)

Date of Prospectus
(attach Prospectus):

Dissertation Information

Is field research and/or data collection complete?

If not, how much is complete?

When do you expect this to be complete?

How many chapters are proposed?

How many chapters are complete?

How much has been reviewed by your first and second readers?

Proposed date of completion of final draft:

Please explain your reason for petitioning, and if you are currently working full-time outside of BU.

Department or Program comments:

Please complete and attach additional information about your research and writing progress.

Required Signatures

Student

Advisor: Approved/Not Approved

Director of Graduate Studies:
Approved/Not Approved

Chair: Approved/Not Approved

For GRS use only. Please do not write below.

Associate Dean's Comments:

Approved/Not Approved

Signature: _____ Date: _____