

PROGRAM EXTENSION REQUEST

Note: Please download or save the form then complete Name of student: **Program:** Choose an item. **Student Number:** Date (dd/mm/yyyy): **Program Route:** Course based **Program Extension:** An amount of time that is added to the maximum number of years permitted in a program in order to allow students to complete their studies and graduate. Link to Extension policy and procedures: http://fgs.athabascau.ca/handbook/extensions/index.php Is this your first request for an extension? O Yes O No If no, list the dates of previous extensions. Reason for request (attach appropriate documentation) Exact dates for requested extension (maximum length of extension is one year): Start date (dd/mm/yyyy): End date (dd/mm/yyyy):



Current funding:

Please list Scholarships/A	wards here			
	derstand the extension guidu.ca/handbook/extensions			
nttp://1gs.utiluouseu	u.ca/ nandoook/ extensions	, maex.pnp		
Signature of Student		Approved	Date:	
Signature of Supervisor (or designate), if applicable		○ Yes ○ No	Date:	
Signature of Graduate Program Director		○ Yes ○ No	Date:	
Signature of Dean, FGS		○ Yes ○ No	Date:	
Comments (required if "no"	' is chosen above):			

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