



## Request for Extension to Master's Program

*Please complete Part I, attach any supporting documentation, and send to your supervisor.*

*Part II will then be filled out by the supervisor and then sent to the Graduate Studies Office.*

### **Part I – Student**

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Department: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Reason for extension:

- Unavoidable circumstances (eg. death in family)
- Other extenuating circumstance– please explain (attach additional page if needed)

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Requested Extension Date: \_\_\_\_\_

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*Signature of Student*

### **Part II - Supervisor**

Provide reasoning for supporting/not supporting the student's request for an extension (attach additional page if needed)

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\_\_\_\_\_  
*Signature of supervisor/Graduate Coordinator*

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*Signature of Dept Head/Director*

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*Signature of Graduate Studies*

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