

MARQUETTE UNIVERSITY GRADUATE SCHOOL

REQUEST FOR EXTENSION OF TIME

The Graduate School does not automatically extend the time a student may need to finish his/her degree. A statement explaining why necessary MUST accompany this form. The student is solely responsible for obtaining the signatures of his/her adviser and the department Graduate Studies (or departmental Chair if the Director is unavailable), and submitting the completed form to the Graduate School. A final extension request will come from the Graduate School.

If the student omits information or signatures requested below or fails to provide a statement, the Graduate School will return the form as the Graduate School approved or denies your extension, you will be notified at the address you provide this form. If you need assistance with this form, please contact the Graduate School at 414-288-7137.

I. STUDENT INFORMATION

Name:	<input type="text"/>	MUID:	<input type="text"/>
Street Address:	<input type="text"/>	Daytime Phone:	<input type="text"/>
City:	<input type="text"/>	State:	<input type="text"/>
		Zip Code:	<input type="text"/>
Program:	<input type="text"/>		
Adviser:	<input type="text"/>	Term & Year Grad Program Began:	<input type="text"/>

This is my: First Request Second Request

II. DEGREE REQUIREMENTS

Enter the date the requirement was, or will be, completed.