

## REQUEST EXTENSION TO TIME ALLOWED FOR ADVANCEMENT TO CANDIDACY

STUDENT INFORMATION:			Student Number:	
Given Name:		Family Name:		
Email:	Degree (e.g. Ph	D):	Program:	
NOTE: Students must be in good financial standing in order to be granted an extension, i.e. they may not be on financial hold due to outstanding tuition fees.				
Program start date:	If trans. from master's, then start date of master's prog.			
Has student been on leave? If so, dates:				
Original deadline for candidacy:				
Is this a first or second extension request?	First	Second	Other:	
If second extension, first extension was from:			to	
	(yyyy/mm/dd)		(yyyy/mm/dd)	
First extensions will normally be granted for 12 months.				
Extension length requested: From			to	
	(yyyy/mm/dd)		(yyyy/mm/dd)	
Please see <a href="http://www.grad.ubc.ca/faculty-staff/policies-procedures/advancement-candidacy">http://www.grad.ubc.ca/faculty-staff/policies-procedures/advancement-candidacy</a> for information on advancement to candidacy.				
The Graduate Program Advisor must attach a memo explaining the reasons for the delay in advancement to candidacy and giving an expected timeline to reaching candidacy.				
☐ Memo from program attached ☐ Timeline attached				
To date, student has completed the following:				
Coursework: Yes No Comprehensive exam: Yes No Approved thesis proposal: Yes No				
We request an extension to the time allowed for advancement to candidacy for the above student.				
Approval of Research Supervisor:				
Signature Nam	e (please print)		Program	Date (yyyy/mm/dd)
Approval of Graduate Advisor or Head of the Graduate Program:				
Signature (must be different from above) Nam	ie (must be different fr	om above)	Program	Date (yyyy/mm/dd)
Graduate Studies use only:  Date of Appro	val	Sign	ature of Associate Director (SAS) o	r G+PS clerk
New Deadline for Advancement to Candidacy:				
Progress Reports Required:			Email notification sent	t by: