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**Petition for Extension of Time Limit**

**ALL GRADUATE degrees & Certificates**

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| **NAME:**  | **NAU ID:**  |
| **NAU EMAIL:**  | **PRIMARY PHONE:**  |
| **DEGREE/PROGRAM:**  |
| **ADVISOR/MAJOR PROFESSOR:** |

All requirements for a Master’s degree or a graduate certificate must be completed within a six-year period. Please review the following policies for criteria that would allow an exception to this rule: [Requirements for Master’s Degree](https://policy.nau.edu/policy/policy.aspx?num=100811) and [Academic Plans: Graduate Certificates](https://policy.nau.edu/policy/policy.aspx?num=100206).

**[ ]  I AM REQUESTING AN EXTENSION OF TIME TO COMPLETE MY DEGREE and/or CERTIFICATE, WHICH INCLUDES COURSES OUTSIDE THE 6-YEAR TIME LIMIT. \***

**Requested Extension to End of Term/Year:**

**PLEASE SUPPLY THE FOLLOWING:**

**Brief Statement of Request within the body of an email or on a separate, attached document addressing:**

Why you did not finish within the allowed time; a projected timeline for degree or certificate completion; and attach an updated program of study that specifies which courses you will take in subsequent semesters to complete the degree **OR** If a thesis or final project is the only remaining requirement, please include the **month and year** of each of the steps required to complete the thesis or project.

\* **INTERNATIONAL STUDENTS:** You must also complete an additional process to gain approval for extending time on your visa status. Please log into inau.nau.edu to begin this additional process.

**[ ]  I AM *ONLY* REQUESTING AN EXTENSION OF TIME TO ALLOW INCLUSION OF COURSES OUTSIDE THE 6-YEAR TIME LIMIT (NOT an extension for degree completion).**

**PLEASE SUPPLY THE FOLLOWING:**

**Brief Statement of Request within the body of an email or on a separate, attached document addressing:**

Which courses you would like to include in the program of study and a rationale behind requesting an exception for the course(s) to be included in your degree, despite the time limit rule.

**Extension/Exception Recommended:**

☐Yes ☐No Advisor Signature: Date:

☐Yes ☐No Chair Signature: Date:

**Please submit the completed form to** **gradsuccess@nau.edu** **or NAU Box 4125.**

**Graduate College Use Only:**

☐Yes ☐No Associate Dean Signature: Date: