In evaluating an extension request, The Graduate School considers several factors, including history of forward progress toward the degree and currency of knowledge in the field of study. To help facilitate the process, the following information must accompany each completed Extension Request Form:

1) A copy of the student's FSU unofficial transcript.
2) For doctoral students, copies of annual reviews. (Note: An annual assessment is not currently required at the university level for master's students).
3) A statement from the major professor, which addresses the currency of coursework and knowledge relevant to the degree, and the progress of the student toward degree completion. If the student has not been a consistent full-time student, an indication should be given as to what employment or other activities have occupied the student's time, and how these may have influenced currency of knowledge in the field. If additional room is needed, attached paperwork may be included with the request.
4) A statement from the student, explaining the basis for the extension request, work accomplished, and timeline for completion. If additional room is needed, attached paperwork may be included with the request.

See Graduate Bulletin (Graduate Degree and Certificate Requirements Section) for additional information regarding the recency requirement.

Effective immediately, extension requests submitted without this information will be returned to their respective departments.

STUDENT INFORMATION:

Name: ____________________________________________________________        EMPLID: ________________________________

Degree Type:  □ Master's  □ Doctorate

Manuscript Type:  □ Thesis  □ Treatise  □ Dissertation  □ N/A

College: __________________________________________________________________________

Department/ Program (if applicable): __________________________________________________________________________

Major Professor: _________________________________________________

Co-Major Professor: _____________________________________________

TIME LIMIT FOR COMPLETION OF DEGREE REQUIREMENTS:

Master's - The work for the master's degree must be completed within seven years from the time the student first registers for graduate credit. Any graduate work transferred from another institution must have commenced not more than seven years prior to completion of the degree for the credits to be applicable to the master's degree. 

Semester and year student first registered for graduate credit:  □ Sp. □ Su. □ Fa. ______ Year

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Doctoral Degrees - All requirements for the doctoral degree must be completed within five calendar years from the time the student passes the preliminary examination, or the student’s supervisory committee will require that a new preliminary examination be passed.

Semester and year graduate work toward doctoral degree started: ☐ Sp. ☐ Su. ☐ Fa. _______ Year

Semester and year student was admitted to doctoral candidacy: ☐ Sp. ☐ Su. ☐ Fa. _______ Year

LENGTH OF DESIRED EXTENSION REQUEST:

Extension requested through: Semester ☐ Sp. ☐ Su. ☐ Fa. _______ Year

PREVIOUS EXTENSION REQUESTS (If applicable, attach copies of all previous extension requests.):

Date previous extension granted: Semester ☐ Sp. ☐ Su. ☐ Fa. _______ Year

Date previous extension ended: Semester ☐ Sp. ☐ Su. ☐ Fa. _______ Year

STATEMENT FROM THE MAJOR PROFESSOR Address the currency of coursework and knowledge relevant to the degree, and the progress of the student toward degree completion. If the student has not been a consistent full-time student, an indication should be given as to what employment or other activities have occupied the student’s time, and how these may have influenced currency of knowledge in the field. If additional room is needed, attached paperwork may be included:

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STATEMENT FROM THE STUDENT Address the basis for the extension request, work accomplished, and timeline for completion. If additional room is needed, attached paperwork may be included:
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APPROVAL OF EXTENSION REQUEST:

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Supervisory Committee Member                             Date

_______________________________________________________________
Department Chair/Unit Head                                    Date

_______________________________________________________________
Academic Dean                                                              Date

_______________________________________________________________
Dean of The Graduate School (or designee)       Date

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