ST. FRANCIS XAVIER UNIVERSITY

Graduate Program Extension Request

Students who have not completed the program requirements by the maximum time to completion (For MA & MSc, normally 5 years from the start of the program; for other programs see Academic Calendar 8.8.1) may apply for a one-year program extension.

For a full discussion of the eligibility, policy, procedures for requesting an extension, please consult section 8.8.7 of the Academic Calendar prior to submitting a request.

Note: Students granted an extension are charged an extension fee.

Part A – *To be completed by the student*

Student Name:
StFX Student ID:
Address:
Phone Number:
StFX e-mail:
Program of Study:
Program start date:
Supervisor's name:
Are you requesting consideration for full-time status as per Section 8.8.4 of the Academic Calendar? Yes ☐ No ☐
Student Signature:
I understand that if I am approved for an extension, I will be charged the extension fee. ☐
Date:

REQUIRED ATTACHMENTS

MA and MSc:

1. The student must attach a letter outlining the reasons for requesting an extension and presenting a plan describing how the degree requirements will be completed during the extension period.
2. Students requesting consideration for full-time status must submit a separate letter providing evidence that they meet requirements for full-time students as outlined in Section 8.5.5 of the Academic Calendar. The Thesis/ Faculty Supervisor must also sign this letter.

Masters in Education:

1. A letter from the student giving the reasons for and duration of the extension MUST be attached to this form.

Masters in Adult Education:

1. The student must attach a letter outlining the reasons for requesting an extension and presenting a plan describing how the degree requirements will be completed during the extension period. **T**he following items are required as part of this letter:
    a. Letter to the Department Chair copied to supervisor with accompanying documentation and stated reason(s) for the request. Complete a timeline for completion of the remaining phases of the program.
    b. A letter from your supervisor either recommending or denying the request, with stated reasons.
    c. The Department Chair, on the basis of a. and b. will make a recommendation to the Dean for a decision.
2. Students requesting consideration for full-time status must submit a separate letter providing evidence that they meet requirements for full-time students as outlined in Section 8.8.4 of the Academic Calendar. The Thesis/ Faculty Supervisor must also sign this letter

Part B – ***To be completed by the Departmental Graduate Studies Program Coordinator or the Chair as appropriate***

Extension Request Recommended: Yes ☐ No ☐
Date:
Comments (or attach letter):
If the extension is granted, the revised completion date will be:
Anticipated graduation date: Spring ☐ Fall ☐ Year:
Signature:
Date:

Part C: ***To be completed by the Associate Vice-President, Research and Graduate Studies as Chair of the Committee on Graduate Studies*****.**

Extension Request: Granted ☐ Not Granted ☐
Full-time Status Request: Not applicable ☐ Granted ☐ Not Granted ☐
Comments/Conditions:
Signature:
Date:

Notification of decision: Student, Dean, Graduate Coordinator or Chair, Registrar, Student Accounts