



Petition for Extension of Time to Complete PhD Requirements

Please submit the completed form to the Graduate School of Arts and Sciences or via email to grsrec@bu.edu. All submitted forms must include all signatures.

Name: _____

Program: Please select _____

BU ID #: _____

Advisor: _____

Academic Information

Date entered program: _____

Date coursework completed: _____

Date of Qualifying Exam: _____

Date of Language Exam(s): _____
(if applicable)

Date of Prospectus: _____

Dissertation Information

Is your research complete? _____

If not, how much is complete? _____

When do you expect the research to be complete? _____

How many chapters are proposed? _____

How many chapters are complete? _____

How much has been reviewed by your first and second readers? _____

Proposed date of completion of final draft: _____

Please explain your reason for petitioning. Additional comments may be attached.

Department or Program comments:

Required Signatures

Student

Advisor: Approved/Not Approved

Director of Graduate Studies:
Approved/Not Approved

Chair: Approved/Not Approved

For GRS use only. Please do not write below.

Associate Dean's Comments:

Approved/Not Approved

Signature: _____ Date: _____