Program O cer's Name Program O cer's email

## Extension Form (continued)

## Justi cation for Request & Thesis Planning

Please explain your reasons for making this request. If you need more space you may include an additional Word Do PDF when submitting this PDF form. If you will be including an attachment, please mention that in the space below.
Your Justi cation:
Thesis Completion Plan (Benchmarks, milestones, etc.)
Agreements and Signature
A student who does not receive a degree at the end of his/her normal course of study because he/she has been unable to complete a required master's thesis is entitled to apply for additional time under the terms described in the Academic Policy Manual (section 7.5.1): An approved thesis extension is required in order for such a student to remain a candidate for a degree. Maintaining a viable degree candidacy is the student's responsibility. A lapsed candidacy may only be revived by appeal to the Academic Council. The need for an approved extension begins on the Friday after graduation day of the quarter in which the student completes the last course(s) required by his/her course of study.
A maximum of three (3) one-year extensions may be granted. Requests should be addressed to the academic unit Chair or Program Director, and must be endorsed by the thesis advisor, the Program O cer, and the cognizant Academic Associate. Each request must include an explanation of the delay and a progress report. Denial of an extension by an academic unit Chair or Program Director may be appealed, via the School Dean, to the Academic Council. A student who has received three one-year extensions from his/her academic unit may apply to the Academic Council for additional time. Such extensions will only be granted in exceptional circumstances.
Note: You are solely responsible for ling your own timely thesis extension request(s). Your degree candidacy expires anytime you let your extension expire, including any lapse between requests, or if you exceed the three year maximum extension policy without explicit Academic Council approval.
I have read and understand the above academic policy concerning thesis/capstone extensions. Yes
Student Digital Signature (Required).

Sign and email this form and any attachments to your Academic Chair and cc your Program O cer and Student Services (sa@nps.edu).

## Required Signatures (OFFICIAL USE ONLY)

-Ed. Tech: File and cc Student Services at SA@nps.edu

Please review and sign in the order listed below.
To: Department Chair
Recommended:
(1) Thesis Advisor, Signature
(2) Academic Associate, Signature
(3) Program O cer, Signature
Approved: Department Chair, Signature
-Dept. Chair: Upon completion, return to Education Tech.