PhD Advisory Committee Report and detailed plan for completion of PhD program must accompany all petitions for Extension of Program Time Limits for PhD students.

Name: ___________________________ Program Term #: ______

ID #: ________________ Supervisor(s): ___________________________

Extension Term: ☐ Winter ☐ Spring ☐ Fall Year: __________

This completed form must accompany the Graduate Studies Office form entitled “Petition for Extension of Program Time Limit.” Reasons for the delay in completing the program on time must be clearly described. The proposed plan for completion of the degree requirements, including a timeline and tangible indicators of progress must be endorsed by all members of the Thesis Advisory Committee.

Explain the reasons for the delay:

Indicate your progress to date toward completion of your degree requirements and provide a detailed plan for the completion of your degree program, including an explicit timeline. (Continue on additional pages if necessary):
APPROVAL OF THE THESIS ADVISORY COMMITTEE

Signatures below indicate that the plan for completion of the degree program outlined on this form is sufficiently detailed and feasible to serve as a benchmark for completion of the degree requirements.

Supervisor(s)

Name ___________________ Signature ___________________ Date __________

Name ___________________ Signature ___________________ Date __________

Comments:

Committee Member: ___________________

Name ___________________ Signature ___________________ Date __________

Comments:

Committee Member: ___________________

Name ___________________ Signature ___________________ Date __________

Comments:

Committee Member: ___________________

Name ___________________ Signature ___________________ Date __________

Comments:

Committee Member: ___________________

Name ___________________ Signature ___________________ Date __________

Comments:

For Department Office use: Initial to confirm all committee members signatures are included or email approval is attached.

Program coordinator: ___________________