



Graduate Studies
 Wilkes University
 84 W. South Street
 Wilkes-Barre, PA 18766

Request for an Extension to Complete Degree Requirements

Directions: Complete and submit this form along with a letter explaining the need for the extension and plan of your coursework. The form and letter will be reviewed by the Advisor who will forward the request to the Director/Department Chair for final approval. Please print clearly.

Name: _____

Address: _____

City/State/Zip: _____

Date of Request: _____ WIN #: _____

Phone (H) _____ (W) _____ E-mail _____

Major _____ Advisor _____

Credits completed _____ Credits transferred _____ GPA _____

Reason for request *(state simply and also attach letter with full explanation)*

Extension requested through *(give month and year of anticipated completion)*

Signature _____ Date _____

For Office Use Only

Reviewed by Advisor _____ **Date** _____

Date courses started _____ Date admitted _____

Last Attended _____

Recommendation _____

Reviewed by Director/Department Chair

Approved extended through _____

Denied

Reviewed by: _____ Date: _____

Director/Department Chair