

Doctoral students are allowed a maximum of eight calendar years from the time they begin the program until the time all degree requirements are complete. An extension to complete program requirements may be granted following review of the student’s academic standing, progress, and recommendation by the dissertation chairperson. Requests for plan extensions will be evaluated on a case-by-case basis by the Dissertation Chair, Program Director and/or Doctoral Committee, and Associate Dean of Psychology. If approved, program extensions will be granted on a term-by-term basis. Approval of an academic plan extension does not guarantee an extension of financial aid eligibility. Students are expected to meet the dissertation goals they outline in this request.

Student Name: _____ CWID: _____

Academic Program: _____ Phone: _____

Internship Completion Date: _____ Last enrolled term: _____

Clinical Competence Examination Completion Date: _____

Dissertation Title: _____ Dissertation Type: _____

Dissertation Committee: Dissertation Chair – _____
 Committee Member – _____
 Committee Member – _____

Outline of term goals

Provide a timeline that, at a minimum, sets deadlines for the outstanding work of your dissertation. The Psy.D. Executive Committee may offer recommendations before issuing a final decision regarding this petition. Here is a sample timeline:

SAMPLE	
Your Remaining Tasks to be Completed this Upcoming Term	Your Proposed Deadlines During the Upcoming Term
Complete 50% of Method section	April 2023
Complete remaining 50% of Method section	May 2023
Outline Results section	Mid-June 2023
Write Results section in prose	August 2023

PLEASE PROVIDE INFORMATION	
Your Remaining Tasks to be Completed this Upcoming Term	Your Proposed Deadlines During the Upcoming Term

Dissertation/Preliminary Oral Defense	Completion Date: _____	Anticipated Date: _____
Dissertation/Final Oral Defense	Completion Date: _____	Anticipated Date: _____
Submission for APA Format Review	Completion Date: _____	Anticipated Date: _____

Discuss the circumstances affecting non-completion of the dissertation within the allotted program time limit and the steps you are taking to ensure completion:

Are there ways that the university can further support your efforts to complete program requirements?

After completing this form, review the information with your dissertation chairperson and ask them to complete their recommendation below and return to you for your submission to Yasmin Rahdari, Associate Program Director, PsyD program.

By signing below, I acknowledge that I understand the statements provided above.

Student Signature: _____ Date: _____

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DISSERTATION CHAIR RECOMMENDATION

- I have reviewed the information presented above.
- Comments/recommendation(s):

Petition Decision APPROVED DENIED

Dissertation Chair: _____ Date: _____



PLAN EXTENSION REQUEST
Doctoral Programs, Psychology Division

PROGRAM OFFICE

Program stipulations of approval:

Program Research Coordinator: _____

Date: _____

Program Director: _____

Date: _____

Associate Dean: _____

Date: _____