



EASTMAN
SCHOOL OF MUSIC
UNIVERSITY of ROCHESTER

Office of Graduate Studies

REQUEST FOR EXTENSION OF TIME

Graduate students at the Eastman School of Music are expected to complete all of their degree requirements within a prescribed time frame. Students who are unable to finish within this time frame may request an extension of time from the appropriate graduate committee. The time limits vary by degree program and are listed below:

MM and MA – 5 years from matriculation at Eastman

DMA and PhD – 6 years following the masters degree OR 7 years following the bachelors degree

To request an extension of time, complete this form and return it to the Graduate Studies Office with the required signature. Once this form has been received by the Graduate Office, your request will be forwarded to the appropriate graduate committee for discussion. Please be aware of submission deadlines for the various committees, all of which may be found on the [Graduate Calendar](#).

Name: _____ Date: _____ UR-ID: _____

UR E-mail: _____ Phone: _____

Address: _____

Degree: _____ Major: _____ Instrument (if applicable): _____

When did you matriculate at Eastman? _____ Program Advisor: _____
(Dissertation Advisor for PhD students)

Please list ALL previous degrees earned:

Degree	Institution	Date Awarded

Have you previously been granted an extension of time? _____

If yes, please list ALL previous extensions and their expiration dates (this information can be found on your ESM transcript or in UR Student):

I would like to request an extension of time through: _____.

Extensions of time are granted through the last day of classes in any given semester (including summer) and should be limited to one or two semesters.

Please list all of your remaining degree requirements and indicate when you plan to complete them. If you are completing a dissertation, please include a specific timetable along with projected dates:

Please state, in detail, why you are requesting the additional semester(s) to complete your degree:

Date dissertation proposal was approved: _____

Dissertation title: _____

Dissertation committee: _____
(advisor)

Advisor: Please state in detail why you are endorsing this student's request for an extension of time. In addition, please comment on the student's timetable for degree completion and if you think it is reasonable:

Signature of Advisor: _____ Date: _____