



**I. INSTRUCTIONS**

Students experiencing delays or obstacles in their studies may apply for a 12 or 24-month extension for completion of the doctoral program. Reasons for requesting the extension could include personal responsibilities, health issues including accident or injury, bereavement, financial hardship, additional program(s) of study, or delays in progress on the Integrated Learning Experience timeline or other program milestones beyond the student’s control. Extensions are renewable after the granted extension period, pending approval of an additional approved request. Students requesting an extension should complete this form, meet with their faculty advisor to discuss their plans, and submit the completed and signed form to the SPH Doctoral Program Committee via email to [Tracey.Wilson@downstate.edu](mailto:Tracey.Wilson@downstate.edu) with subject line “DrPH Extension Request”. Decisions regarding the proposed committee and/or committee change will be sent to the doctoral student and faculty advisor via email.

**II. STUDENT INFORMATION**

Student Name:	
Student ID #:	
Concentration:	
Faculty Advisor Name:	
Extension Request:	<input type="checkbox"/> 12 Months <input checked="" type="checkbox"/> 24 Months

**III. REQUEST FOR EXTENSION AND PLANS FOR COMPLETION**

*Briefly describe the status of your doctoral studies, along with a timeline that you will follow to insure degree completion within the requested extension. The timeline should include specific and attainable milestones for each semester from the beginning to the end of the requested period. In addition, please explain the reason for the request.*

Request Description:	
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**IV. FACULTY ADVISOR AND DOCTORAL STUDENT SIGNATURES**

*The student and faculty advisor confirm by signing below that they agree on the content of this review. If the ILE Committee Chair has been approved and is not the student’s faculty advisor, the Committee Chair should sign.*

Student Signature and date:	
Advisor or ILE Committee Chair Signature and date:	

To be completed by the Chair of the SPH Doctoral Program Committee:	
ILE Progress Review Outcome:	<input checked="" type="radio"/> Approved <input type="radio"/> Not approved         If not accepted, description of additional revisions required:
Signature and date:	