

SAN DIEGO STATE UNIVERSITY
Division of Graduate Affairs
SSE 1410 (619) 594-5213
grad.sdsu.edu
gra@sdsu.edu

Appeal for Time Limit Extension

(TYPE OR PRINT CLEARLY)

_____ Last Name	_____ First	_____ Red ID
_____ Street Address	_____ Apt/#	_____ Degree Objective (e.g., MA, MS, MBA)
_____ City	_____ State	_____ Zip Code
_____ Major (and concentration/specialization if applicable)		

With the approval of the graduate advisor, a student may appeal the Graduate Affairs Office for a one-year time limit extension. Master's and/or advanced certificates coursework must be completed within six consecutive calendar years. Master's and joint master's programs that require more than 36 units of coursework must be completed within seven consecutive calendar years.

I agree that as a condition of granting my appeal all requirements for this advanced degree will be completed within one calendar year of the time limit.

Student Signature _____ Date _____

DEPARTMENT OR SCHOOL

This is to certify that the above-named student has the approval of the graduate advisor for a one-year extension of the six/seven year time limit for completion of masters' degree and/or advanced certificate requirements and will complete all requirements within one calendar year of the time limit, as outlined below:

Signature of Graduate Advisor

Date

DIVISION OF GRADUATE AFFAIRS

Approved Denied

Graduate Dean/Designee Signature

Date