

**The University of Louisiana at Monroe**  
**Office of Graduate Studies and Research**  
Major Professor's Recommendation Form  
For Time Extension to  
Complete Degree Requirements

\_\_\_\_\_  
**Student**

\_\_\_\_\_  
**Degree and Major**

\_\_\_\_\_  
**Student Number**

**Date student admitted to degree program:** \_\_\_\_\_

**Semester/Session and year of first graduate course(s) included in degree plan:**  
\_\_\_\_\_

**Semester/Session and year when first graduate course(s) included in degree plan will expire (6 years for any graduate program except LEC, which is 7 years) :**  
\_\_\_\_\_

**Courses listed on degree plan that are currently or will be out-of-date:**  
(Course, Number, Semester Hours, Grade, Semester/Session/Year)

**If student is currently enrolled, list courses being taken:** (Course, Number, Semester Hours)

**Remaining requirements to complete degree:** (Check all that are applicable)

Comprehensive/General examinations \_\_\_\_\_  
Course work – semester hours \_\_\_\_\_ (indicate number or none)  
Field study, Thesis, Dissertation \_\_\_\_\_ (circle one)

**Attach approved degree plan showing grades for completed courses.**

**Semester/Session and year in which extension will expire (if approved):** \_\_\_\_\_

**I do \_\_\_\_\_ I do not \_\_\_\_\_ approve this request.**

**Reason for approval or disapproval:**

FOR GRADUATE SCHOOL OFFICE USE

Check one:

1<sup>st</sup> Appeal \_\_\_\_\_

2<sup>nd</sup> Appeal \_\_\_\_\_

3<sup>rd</sup> Appeal \_\_\_\_\_

Comprehensive Examination Results

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Major Professor (print name & sign)**

\_\_\_\_\_  
**Date**