



BANGABANDHU SHEIKH MUJIBUR RAHMAN AGRICULTURAL UNIVERSITY
Gazipur-1706

APPLICATION FOR EXTENSION OF PROGRAM DURATION

1. Name of Student:
2. Registration No:..... Term of Admission:
3. Program:MS/PhD.....
4. Department:.....
5. Major Professor:.....

	<u>Due Term</u>	<u>Submission Term</u>
6. Major Professor/Research Supervisor Selection:		
7. Committee Proposal Submission:		
8. Program of Studies Submission.....		
9. Thesis/Dissertation Proposal Submission:.....		
10. Qualifying Examination (Ph.D):.....		
11. Preliminary Exam (Ph.D) Theory:.....		
Oral:.....		

12. Course Completed so far: Credit. GPA Earned:
13. Research Completed so far: Credit.
14. Did You Obtain 'U' Grade in Research in any Term? Yes/NoTerm:.....Cr. hr.:
15. Was the Program duration Extended before? If yes, for which Terms:
16. Extension Required for..... Terms, up to Term
17. Valid Reason for Term Extension :
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I do hereby declare that the information mentioned above is true.

Date: _____ Signature of the Student _____

Recommendations:
a) Major Professor (Proceedings of the Advisory Committee Meeting must be Enclosed.):.....
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Signature of the Major Professor

b) Head of the Department :

Signature of the Departmental Head

c) Dean of Graduates Studies:

Signature of the Dean, Faculty of Graduate Studies