



BANGABANDHU SHEIKH MUJIBUR RAHMAN AGRICULTURAL UNIVERSITY
Gazipur 1706

APPLICATION FOR EXTENSION OF PROGRAM DURATION

1. Name of the 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 Study Submission..... | | |
| 9. Thesis/Dissertation Proposal Submission:..... | | |
| 10. Qualifying Examination (PhD) :..... | | |
| 11. Preliminary Exam (PhD) 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 : | | |
| | | |
| | | |

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.):.....
.....
.....

Signature of the Major Professor

b) Head of the Department :

Signature of the Head of the Department

c) Dean, Faculty of Graduates Studies:
.....
.....

Signature of the Dean, Faculty of Graduate Studies