**Application
for
Extension of Doctoral Thesis**

Important: for each extension, you have to hold a TAC meeting and submit a progress report!

**Name:** ………………………………………………………………………………………………...………..

**GGNB Program:** ……………………………………………………………………………………………..

**Title of Thesis:** ………………………………………………………………………………………............

**Start of Thesis Work** (day/month/year)**:** …………………………………………….………………………...........

**Extension Period required:** from ....................... (dd/mm/yy) to ....................... (dd/mm/yy)
(maximum duration: 6 months; make sure to apply for an extension period corresponding to your schedule!)

**The funding for the extension period has been discussed:** yes no

**Please explain the reason for the requested extension and attach a schedule** (see p. 2).

**Further comments** (e.g. significant delay due to parental or sick leave – for further information see thesis extension handout)**:**

**Confirmation by Thesis Advisory Committee:**

Date: ………………………….

........................................... ............................................ ........................................

Names (in print) and signatures of thesis advisory committee members

**The confirmation by the office will be sent to you by e-mail.**

**Detailed Time Schedule for the Extension Period**