

## REQUEST FOR AN EXTENSION TO COMPLETE THE DMIN COMPREHENSIVE

For those DMin students who entered the program prior to 2019, they are expected to complete the comprehensive examination within three years of admission to the program (§4.6.4). Students who fail to meet this deadline may apply for an extension. An extension for one year can be granted by the DMin Director; any additional extensions need the additional approval of their College Graduate Director. The period of extension is normally one year. Students who have not completed their comprehensive examinations by the end of their fifth year of registration are normally not eligible for any further extension (see §2.10.1). To apply for an extension, the student must present the causes for the delay and evidence that the remaining requirements will be completed within the period of the extension requested.

**For a first extension request**: section 1 of this form must be completed by the DMin Student using the fillable PDF function. Print, sign, scan and send the completed form to the DMin Office.

**For a subsequent extension**: section 1 of this form must be completed by the DMin Student using the fillable PDF function. Once the signature of the College Graduate Director is obtained (Section 3), scan and send the signed form to the DMin Office.

## Section 1: Student Information (to be completed by the student)

Leat News	Circh Name			Ct d a .a t Ni.	
Last Name:	First Name:			Student No	umber:
College of Registration:					
☐ EM	☐ KN ☐	RG	SM	☐ TR	□WY
U of T Email:				Month and	d Year of Admission:
This is a request for a <b>FIRST</b> extension a <b>SECOND</b> extension an <b>EXTRAORDINARY</b> extension					
Reason for the request along with a physician's certificate in the case of illnesses: (Use the following space or submit a separate letter.)					
Student's Signature:					Date:
Section 2: To be complete	ed by the DMin	Director			
Has all course work been con	YES	☐ YES ☐ I		NO	
If 'No', when is the expected completion date of course work? Date: (MMM-YYYY)					
If 'No', when is the expected	completion date o	f course work?	Date:		(MMM-YYYY)
If 'No', when is the expected  Section 3: Approvals	completion date o	f course work?	Date:		(MMM-YYYY)
·					(MMM-YYYY)
Section 3: Approvals	nsive Examination				· · · · · · · · · · · · · · · · · · ·
Section 3: Approvals  Date by which the Comprehe	nsive Examination	must be compl			· · · · · · · · · · · · · · · · · · ·
Section 3: Approvals  Date by which the Comprehe  For First, Subsequent and Extraordinal  Please Indicate:	nsive Examination  y Extensions:  College Graduate Di	must be compl			(MMM-YYYY)
Section 3: Approvals  Date by which the Comprehe  For First, Subsequent and Extraordinal  Please Indicate:  Approved / Declined	nsive Examination  y Extensions:  College Graduate Di	must be compl irector's Signature:			(MMM-YYYY)
Section 3: Approvals  Date by which the Comprehe  For First, Subsequent and Extraordinal  Please Indicate:  Approved / Declined  For Subsequent and Extraordinary Extraord	nsive Examination ry Extensions:  College Graduate Di ensions:  DMin Director's Sign the purpose of admission tial assistance and awar Your Personal Infot the TST Registrar, Tor	must be complinector's Signature: nature: on, registration, acards, graduation and formation will be pr	demic programs university adva otected at all tir ology, 47 Queer	ncement, an	Date:  Date:  Prelated student activities, activities and reporting to the government.