



According to the GCTS Conjoint Graduate Degree Handbook (§§A7.2.2.2 and A8.5), extensions to program requirements are subject to the regulations on achieving Candidacy and satisfactory progress. Candidacy must be achieved by the end of the third year for all doctoral programs. In exceptional circumstances, a student who has not met these requirements may be permitted to register in the program for up to 12 months at the discretion of the GCTS Coordinator. Continuation beyond 12 months will require the approval of both the college Graduate Director and the GCTS Executive.

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. This form **MUST** be completed using the fillable PDF function.

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

Last Name:		First Name:	
College of Registration:		Student Number:	
UoFT Email:		Month and Year of Admission:	
This is a request for <input type="checkbox"/> a FIRST extension <input type="checkbox"/> an EXTRAORDINARY extension			
Please, provide a reason for the delay. Additional sheets may be appended. Medical or disability related circumstances, which have delayed the completion of assignments, shall be accompanied by a health or disability related certificate from an appropriate professional. For time-limited medical conditions, please use the Verification of Illness form .			
Student's Signature:		Date:	

Section 2 – To be completed by the Supervisor

A statement detailing the reasons to approve or deny the extension must accompany this request. Additional sheets may be appended to this form.		
Please Indicate recommendation: <input type="checkbox"/> Approved <input type="checkbox"/> Declined	Supervisor's Signature:	Date:

Section 3 – Approvals

For all extensions:

Please Indicate: <input type="checkbox"/> Approved <input type="checkbox"/> Declined	College Graduate Director Signature:	Date:
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For all extensions:

Please Indicate: <input type="checkbox"/> Approved – date by which Candidacy must be achieved: _____ <input type="checkbox"/> Declined	
GCTS Signature:	Date:

Personal information is collected for the purpose of admission, registration, academic programs, university-related student activities, activities of student societies, safety, financial assistance and awards, graduation and university advancement, and reporting to the government.

Your Personal Information will be protected at all times.

If you have questions please contact the TST Registrar, Toronto School of Theology, 47 Queen's Park Crescent East, Toronto, ON, M5S 2C3 or call 416-978-4040.

Office Use:	<input type="checkbox"/> College Registrar	<input type="checkbox"/> Student	<input type="checkbox"/> GCTS Office
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