Scholarships Office

Request for extraordinary extension of scholarship period (Type 6-B)

(This is not a request to extend the duration of studies)

Please note: during the extension period of a 6-B scholarship, employment of any kind, at Technion or elsewhere, is strictly prohibited, including as a teaching assistant at the Office for Academic Staff at Technion, unless specifically approved by the Dean of the Graduate School.

- Please type the requested details using this form
- Please fill in all the requested details

Student's Name: **ID. / Student No:**   **Cell No. #:**

Degree:

Dept.:   **Name of advisor:**

Extended scholarship months requested (No.):   months

From (month and year)**:**   **Until** (month and year):

Please attach the following document to this form:

1. A detailed letter from the student specifying a schedule for graduation.
2. A letter from the advisor explaining the reason(s) for the requested extension
3. A letter from the departmental graduate studies coordinator referring to the above mentioned letters (in addition to the recommendation at the bottom of this form).

Schedule for graduation (will be determined with the advisor – after consulting the "Submission of the thesis – before the exam"):

Submission of thesis draft to advisor: Presenting a seminar lecture:

Submission of thesis to the Graduate School: Comments:

Student's Signature: **Advisor's Signature**:

Recommendation of the Graduate Committee

To: Dean of the Graduate School (through the scholarships office)

From: Head of the Departmental Graduate Studies Committee

We hereby report regarding the extension of (No.)   scholarship month (No.)   **portions.**

From (month and year):   **Until (month and year:**

Comments:

Date: **Signature:**