THE UNIVERSITY OF AKRON
DEPARTMENT OF CIVIL ENGINEERING

Ph. D. Qualifying Examination Notification Form

Date: ____________________
       (mm/dd/yy)

To: Chair, Graduate Policy Committee, Department of Civil Engineering

From: Student Name: ______________________________________________________
      Student Signature: ____________________________________________________
      Student ID#: ________________________________________________________
      Student Mailing Address: _____________________________________________
      _________________________________________________________________
      Student Telephone #: (___)___________________________________________

Major Area of Study: ______________________________________________________

Program (Check one): Civil Major holding M.S. .... □ (One-semester time extension only.)
                       Civil Major holding B.S. only.... □

I respectfully request a time extension before my first attempt at the Civil Engineering Ph.D. Qualifying Exam. (Students may apply for at most one time extension.)

Extension request: One semester ..... □

       Two semesters .... □

Approved ..... □            Comments: _______________________________________

Denied .......... □            __________________________________________________