Yale School of Medicine

Thesis Deadline Extension Request Form

MD STUDENTS

MD Students requesting a YSM MD Thesis deadline extension must submit an extension request form to their Head of Advisory College for review and signature. Once the student receives the signed form from their Head of Advisory College, the student must submit the form to the Department Thesis Chair for signature. <u>Note:</u> Your thesis mentor/advisor may differ from your Head of Advisory College. Your Head of Advisory College is the faculty member that is responsible for signing this form.

MD-MHS STUDENTS

MD-MHS students requesting a YSM MD-MHS thesis deadline extension must submit an extension request form to their Head of Advisory College for review and signature. Once the student receives the signed form from their Head of Advisory College, the student must submit the form to Dr. Alexandra Hajduk (<u>Alexandra.hajduk@yale.edu</u>) who will act as the Department Thesis Chair for all MD-MHS students. <u>Note:</u> Your thesis mentor/advisor may differ from your Head of Advisory College. Your Head of Advisory College is the faculty member that is responsible for signing this form.

HEAD OF ADVISORY COLLEGE

Head of Advisory Colleges must sign this form and return to the student, who will then submit the form to their Department Thesis Chair for review, signature, and approval.

THESIS CHAIRS

Thesis Chairs should return the completed form to the student via email, and Cc the student's Head of Advisory College and the OSR (<u>osr.med@yale.edu</u>).

Please visit the OSR MD Thesis website for the full list of thesis deadlines for MD and MD-MHS students.

Extensions beyond the thesis deadlines listed on the OSR site will be granted only for special circumstances and must have the approval of the student's thesis mentor/advisor, Head of Advisory College, and the Departmental Thesis Chairperson. Students seeking an extension for the January 17, 2025, deadline must submit a Thesis Deadline Extension Request Form to their Head of Advisory College, and the Departmental Thesis Chair, for approval. Extensions, if granted, are granted in 2-week increments. An OSR staff member will confirm that an extension for the student has been received and will provide an updated timetable of deadlines that the student must adhere to. If a student is unable to meet the extended deadline for thesis submission, they must submit a new Thesis Deadline Extension Request Form following the same process listed above. <u>A new Thesis Deadline Extension Request Form is required for each 2-week extension period.</u> Students missing the August 22nd, January 17th, and/or March 28th deadlines will be referred to the Progress Committee to ensure they receive adequate support to make progress towards this graduation requirement. In the event of an extension, if granted, the following **ABSOLUTE** Class of 2025 Thesis Extension Deadlines will apply:

Class of 2025 MD Thesis Extension* Deadlines

Students missing either of these deadlines will be unable to graduate in 2025

March 21, 2025, at 5 pm	For those students receiving thesis deadline extensions, this is the last date for the thesis
_	to be formally approved by the thesis mentor/advisor and submitted to Departmental
	Thesis Chair for review and approval.
April 18, 2025, at 5 pm	For those students receiving thesis deadline extensions, this is the latest possible date for
	submission of an approved, final version of thesis to the library via ProQuest.

*All late theses require an extension. The student must submit the initial extension form by January 17, 2025, at 5pm.

STUDENT

I am hereby requesting an extension to my thesis submission deadline of January 17, 2025. I attest the following:

- I have reviewed the information above and acknowledge that extensions are only granted for special circumstances.
- My Thesis Mentor/Advisor has approved my extension request.
- I acknowledge that extensions are only granted in two-week blocks, and that if I am granted an extension, I will adhere to the new deadline I am given.

Name	Email	
Signature	Date	
HEAD OF ADVISORY COLLEGE		
I have reviewed the above information and approve this student's thesis deadline extension request.		
Name	Email	
Signature	Date	
DEPARTMENT THESIS CHAIR		
I have reviewed the above information and approve	this student's thesis deadline extension request.	

Name

Date

Signature