

STUDENT NAME: _____

LAST NAME **FIRST NAME**

MAJOR: _____ DEGREE: _____

REQUESTED OPT DATES: Start date: _____ **End date:** _____

 I have filed a Part-Time Request Form with ISSS (if less than full-time).

_____ completing other graduation requirements. Attach letter of explanation from academic advisor.

Student Signature: _____

1) By what date is the student expected to complete his/her program of study (all exams finished and/or thesis defended successfully and submitted?)

2) By the completion date listed above, will the student have been enrolled full-time for at least 9 months in good academic standing?

Yes No

Name: _____ Title: _____

Signature: _____ Date: _____