



GEORGETOWN UNIVERSITY
School of Continuing Studies
Center for Continuing and Professional Education

Non-credit Program Extension Petition Form

Student Instructions: Complete all required information. Submit this form by email to ccpeprograms@georgetown.edu or in person to the front desk, 640 Massachusetts Avenue NW, Washington, DC 20001.

Full Name: _____

NetID: _____ **GUID:** _____

Phone: _____

Email: _____

Program: _____

Start Term: _____

Program Policy for Certificate Completion (circle one): 1 year / 2 years

Reason for Extension Request:

Provide reason(s) why you are unable to complete certificate requirements in the allotted time period as indicated by the certificate program guidelines. Please document in the space below or as attachment.

Estimated Term of Completion: _____

The student has requested an extension in time required to complete the certificate program. The student must complete the following remaining courses in order to obtain the certificate:

	Program/ Course Name	Program/ Course Number
1.	_____	_____
2.	_____	_____

For office use only:

Official Review & Evaluation (to be completed by university academic administrator)

Extension granted: Approved / Denied If denied, reason: _____

Received by: _____ Signature: _____ Date: _____

Reviewed by: _____ Signature: _____ Date: _____

*Add to student record in Destiny and add internal comments on full record