

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 _____