



Office of the Associate Dean for Mentoring Academic Progress and Advancement

# GRADUATE OFFICE

## REQUEST FOR EXTENSION OF MAXIMUM RESIDENCY RULE (CSAPG LEVEL)

Date: \_\_\_\_\_

DR. MA. THERESA T. PAYONGAYONG  
University Registrar, UP Diliman

Subject: Letter of Appeal : CSAPG (Committee on Student Admission Program for Graduation)

Thru Channels:

Dear Dr. Payongayong,

I would like to request for the extension of the maximum residency rule for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please find attached my Gantt Chart endorsed by the thesis/dissertation adviser. I hope my request will merit your kind consideration. Thank you.

Signature over Printed Name	Degree Program	Student Number
Endorsed by:		Recommending Approval:
Program Adviser		Director / Program Coordinator
Recommending Approval:		Approved:
GIL M. PENULIAR, PhD Associate Dean for Mentoring Academic Progress and Advancement		LAURA T. DAVID, PhD Acting Dean, College of Science

*Based on the action/s of the abovementioned College/Institute/School officials, the appeal can be endorsed by the University Registrar, if necessary. Attach the following: TCG, Program of Study, Thesis/Dissertation Proposal, Result of Preliminary/Comprehensive/ Qualifying/ Candidacy Examinations, Colloquium. These are the usual Documents being required by the Committee. The Committee may request additional supporting documents. You may also decide to include any other documents you feel may be helpful. Use this Form if more than 10 years in the program.*