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|  | **Institutional Effectiveness and Planning Office of Decision Support**  **Program Review** |

**Request for Extension of Time for Program Review**

To request an extension in the program review cycle, please complete the information below, route through DocuSign, and with a signed copy going to Jonna DeSantis - [jonnad@usf.edu](mailto:jonnad@usf.edu)

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| --- | --- | --- | --- | --- |
| **CIP** | **Program Name** | **Scheduled Date** | **New Date** | **Reason** |
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**Justification**

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Signature of Department Chair Date

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Signature of College Dean Date

Request approved/denied:  Approved  Denied

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Terry Chisolm, Office of the Provost & Executive Vice President