

# Office of the Vice Chancellor

## Thesis Hold Request

Date of submission (month/day/year):

### 1. Student information

Name (last, first, middle):

MIT ID:

Department number or program name:

Address:

Phone number:

MIT email:

### 2. Student Request

Thesis title:

Length of time held requested (maximum 90 days\*):

Have you requested and/or been granted a thesis hold previously? If yes, for how long?

Reason for request:

### 3. Department approval

Student's signature:

Advisor's signature:

### 4. Institute approval:

*Professor Daniel E Hastings, Interim Vice Chancellor*

\*The Vice Chancellor will not approve a petition for thesis hold beyond three months. A request for a longer period must be reviewed and approved by the [Vice President for Research](#).