Request for Post Project Requirements (PPR) Extension:
Office of Undergraduate Research (OUR) Senior Thesis Research Funding Program

Date: ____________________

Recipient Name:___________________________________ Net ID: _____________

Department: _________________________ Faculty Adviser:___________________

Class Year: ________________

Funds Awarded for: Fall _______ Winter/Intersession _______ Summer_______

Amount Awarded from OUR $ _____________________

Amount Awarded from Other Funders: Dept: _____________ Amount $ ________

   Dept: _____________ Amount $ ________

   Dept: _____________ Amount $ ________

Total Funds Spent to Date $ __________________

   Cost of Living Stipend $__________________________

   Materials and Supplies (related to research) $________________________

   Other (please explain) ___________________ $______________________

Remaining Funds $_________________________

Reason for PPR Extension Request: ______________________________________

_____________________________________________________________________

Amount of additional time requesting (no more than six weeks): ______________

Recipient Signature___________________________________________________

Faculty Adviser Signature ______________________________________________

Please send any questions you may have and the completed form via email to thesis@princeton.edu.

Reviewed on______________ by __________________________

Approved____________________ Extension Deadline__________________

Denied_______________________ Reason for Denial_____________________