Extended Access Request Form

Students lose access to various CMU resources after their last enrolled semester. If approved, access is given for one-semester. One approval does not guarantee a future approval.

Student: _____   Signature: _____   ID#: _____

Email: _____   Degree Program: _____

Credits Remaining: _____   Expected Graduation Date: _____

Requested Extended Access:

      Email (cmich)

      Udrive

      Microsoft Teams

      Library Resources

      Other: _____

Justification of each item for request:

Required Approvals:

Faculty Advisor
Name: _____   Signature: _____   Date: _____

Department Chair (or Interdisciplinary Program Director)
Name: _____   Signature: _____   Date: _____

Graduate Studies
Name: _____   Signature: _____   Date: _____

                     Comments:

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