In response to the difficulties that the COVID-19 pandemic has placed on the progress of many of our PhD students, the University of Pittsburgh has committed $4.5 million to support PhD students who are close to completion but whose progress has been delayed by COVID-19. PhD students who have passed their comprehensive exams and whose funding has run out will be eligible for an additional semester of funding in academic year 2021-2022 through TA/TF/GSA/GSR appointments or fellowship extensions through their schools and departments.

Application Process
Each eligible PhD student must complete a request for extended funding. Students, advisors, program directors/department chairs and the Dean’s Offices must confirm that the student meets the eligibility criteria.

Completed forms with all signatures are due by May 20, 2021.

Eligibility
To be eligible for the extended support, PhD students must meet the following five criteria:

1. Have been delayed by COVID-19 pandemic-related issues (including, but not limited to, lack of access to labs, libraries, fieldwork; restrictions on human subjects research; restrictions on travel; interruption due to family or self-care responsibilities due to the COVID-19 pandemic)
2. Have passed comprehensive exams
3. Are making satisfactory academic progress
4. Have been funded continually by appointments or fellowships for the past two years (not including summers)
5. Have exhausted their funding in spring 2021 or summer 2021

Please see Request for Extension of PhD Funding at www.provost.pitt.edu/extension-phd-funding. Email Vice Provost of Graduate Studies Amanda Godley at vpgodley@pitt.edu with any questions.
Student First Name:     Student Last Name:
Pitt Email Address:     PeopleSoft Number:
School:
Department:
Program:
Description of COVID-related factors that led to delay in progress (maximum 1,000 characters including spaces):

☐ I attest that the above description is true and that I meet all five criteria listed above.

Student Signature:             Date:

☐ I confirm that my advisee meets all five criteria listed above.

Advisor Signature:
Advisor Name:              Date:

☐ We have reviewed the student’s records and confirm that the student meets all five criteria listed above.

Dept./Program Representative Signature:
Dept./Program Representative Name:           Date:

☐ We have reviewed the student’s records and confirm that the student meets all five criteria listed above.

Dean’s Office Representative Signature:
Dean’s Office Representative Name:             Date: