**NMDPSM Barbara Buchbinder Nurse Research Program**

**Request to Extend the Time Period for the Degree Requirement**

**General Principles for Extending the Time Period for the Degree Requirement**

NMDP will consider requests to extend the time period beyond the ten (10) years in which the relevant doctoral degree must have been earned for reasons related to family care responsibilities, disability or illness, or active duty military service. In general, NMDP will extend the time period for the degree requirement for a time period equivalent to the time away from the applicant’s career. Extensions related to periods of part-time status normally will be prorated to reflect the actual time away and normally will be considered only when the appointment is reduced by 50% or more for a sustained period of time.

**Evaluating a Request for Extension – Factors to be Considered:**

**Family Care Responsibilities**: Investigators, both male and female, who took time away from their career because of family care responsibilities that occurred during the ten-year period after the relevant doctoral degree was earned may request an extension equivalent to the time period away from their career. Family care responsibilities can include the birth or adoption of a child, or the direct care of sick, injured, or disabled children or other close family members.

**Disability or Illness**: Investigators who had a hiatus in their career because of their own illness or disability that occurred within the first ten years after completing their relevant doctoral degree may request an extension equivalent to the time period away from their career.

**Active Duty Military Service**: Investigators whose career was interrupted for active duty military service within the first ten years after completing their relevant doctoral degree may request an extension that is equivalent to the period of active service. Active duty military service is not restricted to the United States military.

**The information described in the request for an extension will be considered confidential. The individual submitting a request for an extension will be responsible for providing true, accurate, and complete information.**

**Check reason for hiatus from career or research:**

[ ]  Family Care Responsibilities

[ ]  Disability or Illness

[ ]  Active Duty Military Service

Date hiatus began: Month       Date       Year

Date hiatus ended: Month       Date       Year

Provide detailed description of hiatus:

Principal Investigator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name:

Email:

Phone Number:

Date:

**Please submit this form and any supporting documentation to** **BBGrant@nmdp.org****.**

**You will be notified of the determination within one week.**