**Middlesex University**

**Research Degrees**

|  |  |  |
| --- | --- | --- |
| **Application for Extension to Candidature Period** |  | **Student Number:** |

**Please see Section A1.11 of the Regulations for Research Degree Programmes before completing this form.**

**1 Student Details**

|  |  |
| --- | --- |
| Surname |  |
| Forenames |  |
| Start date |  |
| Title of research programme |  |

**2 Supervision of Programme of Work**

|  |  |  |
| --- | --- | --- |
| **2.1** Director of Studies / Consultant |  | |
| **2.2** Supervisor(s) / Advisor(s) | Supervisor / Advisor 1 | Supervisor / Advisor 2 |

**3 Student Progression Dates**

|  |  |
| --- | --- |
| Registration review date (MPhil/PhD, ArtsM/D, etc.)  Programme Approval date (M/DProf, etc.) |  |
|
| Transfer date (MPhil to PhD ArtsM to ArtsD, MProf to DProf, etc.) |  |
|
| Expected date for final Viva |  |
|

**4 Requested Period of Extension**

|  |  |
| --- | --- |
| Start Date | End Date |

**5 Previous Suspensions or Interruptions**

|  |  |  |
| --- | --- | --- |
| Suspensions or interruptions | start |  |
| end |  |
| start |  |
| end |  |
| start |  |
| end |  |
| start |  |
| end |  |

**6 Statement by the Student**

**Please complete the following highlighting the reason for requesting this extension:**

You may be required to submit documentary evidence to support this application. Please contact [researchdegrees@mdx.ac.uk](mailto:researchdegrees@mdx.ac.uk) for clarification on what you will need to provide.

Are you aware of any financial implications if this extension is granted? YES/NO

*If* ***NO,*** *please contact ResearchDegrees@mdx.ac.uk for information and advice*

If you are an overseas student, are you aware of implications to your visa if this extension is granted? YES/NO

*If* ***NO****, please contact the International Student Advice Team.*

|  |  |
| --- | --- |
| **Summary of case for extension (not exceeding 500 words)** | |
| **Summary of progress made to date (not exceeding 500 words) and of the work still to be completed** | |
| I confirm that the information in this form is correct and I have attached any relevant documentary evidence**.** | |
| Signed (student) | Date |

**7 Recommendation by the Supervisors**

|  |  |
| --- | --- |
| We support this extension and believe that the applicant has the potential to complete successfully the programme of work p**ro**posed and is currently on track to complete the degree within the period of the extension requested. | |
| Supervisory team comment: | |
| Signed (DoS / Consultant) | Date |
| Signed (Supervisor / Advisor) | Date |
| Signed (Supervisor / Advisor) | Date |

**For Official Use Only**

**Approval of Research Degrees Faculty Committee:**

Extension to the Candidature Period has been:

Approved: deadline for submission is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rejected

|  |  |
| --- | --- |
| Signed (Chair) | Date |

**Approval of Research Degrees Board:**

|  |  |
| --- | --- |
| Signed (Chair) | Date |

**Research Degrees Administration Team**

The student has been informed of this outcome