



Date submitted to Graduate School (recorded by Graduate School)

RESEARCH DEGREE: Application for Exceptional Extension to Period of Registration

This form should be used to apply for an extension to the period of registration of a research degree candidate. This form must be completed electronically and sent to research.degree@solent.ac.uk in the Graduate School, who will make arrangements for the application to be considered by the Chair/Deputy Chair of the Research Degrees Committee. ([Academic Handbook Section 2R](#) refers).

PART A: THE CANDIDATE

1. Surname/Family Name:

2. First Name(s):

3. Student ID Number:

4a. Department	Department of Arts & Music	Department of Business & Law	Department of Science & Engineering	Warsash Maritime School	
	Department of Sport & Health	Department of Social Sciences & Nursing	Department of Film & Media		
4b. Research Theme	Engineering & Environment	Human Function & Health	Media, Culture & the Arts	Social Research & Policy	

5. Start date:

6. Mode of Study:

Full-Time		Part-Time	
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7. Level of Award:

MPhil		PhD	
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8. Current maximum registration end date:

9. Expected thesis submission date:

10. Name of any external collaborating establishment(s) (if applicable):

PART B: EXTENSION TO PERIOD OF REGISTRATION

Please be aware that periods of extension may exceptionally be granted for a maximum of 6 months only, please refer to the Doctoral Student regulations for permitted circumstances. ([Academic Handbook Section 2R](#) refers).

11. Request for extension of registration to (DD/MM/YY):

12. Reason for extension (Please attach additional information and supporting evidence):

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PART C: SUMMARY OF CANDIDATE'S PROGRESS

13. Please provide a summary of your progress to date and your plan of work for the requested extension period:

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Signed by candidate:

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Print Name:

	Date:	
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PART D: SUPERVISORY TEAM RECOMMENDATION

14. Please provide a summary of the student's progress to date:

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15. We have considered all aspects of the candidate's summary of progress for the extension, and we recommend that the registration period be extended as shown above.

Signed by DoS:

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Print Name:

	Date:	
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PART E: APPROVAL GRADUATE SCHOOL

Approved new registration end date:

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Approved by Chair / Deputy Chair
RDC:

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Print Name:

	Date:	
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