# cid:image002.png@01D3C1D4.5F3F7C60 **--------------------**

# Date submitted to RIE (recorded by RIE)

# **RESEARCH DEGREE: Application for Exceptional Extension to Milestone or Period of Registration (Temporary COVID-19 Process)**

*This form should be used to apply for an extension to a milestone, or the period of registration of a research degree candidate. This form must be completed electronically and sent to* *research.degree@solent.ac.uk* *in Research, Innovation & Enterprise, 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).*](https://www.solent.ac.uk/research-innovation-enterprise/research-degrees/documents/academic-regulations-for-postgraduate-research-students.pdf)

## PART A: THE CANDIDATE

|  |  |
| --- | --- |
| **1. Surname/Family Name:** |  |
| **2. First Name(s):** |  |
| **3. Student ID Number:** |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **4. School:** | Art Design & Fashion |  | Business, Law & Communications |  | Media, Arts & Technology |  | Sport, Health & Social Sciences |  | Maritime Science & Engineering |  |

|  |  |
| --- | --- |
| **5. Start date:** |  |
| **6. Mode of Study:** | Full-Time |  |  Part-Time |  |
| **7. Level of Award:** | MPhil |  | PhD |  |
| **8. Current maximum registration end date:** |  |
| **9. Expected thesis submission date:** |  |
| **10. Expected Transfer/Project Approval Submission date:** |  |
| **11. Name of any external collaborating establishment(s)** (if applicable)**:** |
|  |  |

## PART B: EXTENSION TO MILESTONE OR 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).*](https://www.solent.ac.uk/research-innovation-enterprise/research-degrees/documents/academic-regulations-for-postgraduate-research-students.pdf)

|  |  |
| --- | --- |
| **12. Request for extension to milestone/period of registration** *(delete as appropriate*) **to (DD/MM/YY):**  |  |

|  |
| --- |
| **13. Reason for extension request** (Please attach additional information and supporting evidence): |
|  |  |

**PART C: SUMMARY OF CANDIDATE’S PROGRESS**

|  |
| --- |
| **14. Please provide a summary of your progress to date:** |
|  |  |

|  |  |
| --- | --- |
| **Signed by candidate:** |  |
| **Print Name:** |  | **Date:** |  |

**PART D: SUPERVISORY TEAM RECOMMENDATION**

|  |
| --- |
| **15. Please provide a summary of the student’s progress to date:** |
|  |  |

|  |
| --- |
| **16**. 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:** |  |
| **Print Name:** |  | **Date:** |  |

**PART E: APPROVAL RESEARCH, INNOVATION & ENTERPRISE**

|  |  |
| --- | --- |
| **Student’s updated milestone submission date / maximum registration end date** *(delete as appropriate*)**:**  |  |

|  |  |
| --- | --- |
| **Approved by Chair / Deputy Chair RDC:** |  |
| **Print Name:** |  | **Date:** |  |