

GRADUATE SCHOOL

Research Postgraduate Programmes

Request for Extension of Studies

I. Student Particulars (* delete where appropriate)								
Name:				_ Student No.:		Department:		
Phone No.:				Study Commencement Date:				
Principal Supervisor (PS):				Programme: <u>MPhil/PhD*</u>		Mode of Study: <u>FT/PT*</u>		
II. Extension of Study								
Please click " $$ " the appropriate option								
□ 3-month extensio	\Box 3-month extension \Box 6-			month extension				
Extension Period:	(dd/mm/y			mm/yyyy) to	yy) to (dd/mm/yyyy)			
Reason(s) to apply for extension (Please attach a study plan, duly endorsed by your Principal Supervisor, during								
your extension period):								
Note: For any extension beyond the maximum study period (i.e. 24 months from the expiry of the normal study								
period), in addition to the reason(s) provided above, justifications MUST be provided by the Principal Supervisor,								
to be endorsed by the Department Head and Faculty/School Dean, on a separate sheet.								
III. Student Declaration								
I have read and understood the explanatory notes before proceeding to fill out this application form.								
Student's Signature			Date					
IV. Recommendation and Endorsement								
We endorse the above request and confirm that it has no adverse academic and resource implications to the University.								
Principal	N 7							
Supervisor	Name			Signature			Date	
Department Head	Name			Signature		D	Date	
Faculty/School								
Dean	Name			Signature		D	Date	
V. Approval								
Graduate School	ol Signature			Date				
Explanatory Notes								
Students who have not completed their studies within the normal study period should apply for extension at least								
one month before the study period lapses. Normally, an extension period of 3 or 6 months is granted each time.								
(Under exceptional circumstances, an extension period of 12 months will be granted upon strong justification from								
the student's Principal Supervisor.)								