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| **STUDENT REQUEST FORM****Extension of Registration for a Graduate Research Programme***(This form should only be used if a student is unable to access the SISWeb Extension Request Form)*This application form should be completed by graduate research students requesting an extension to their registration, and to their planned thesis date, and should be submitted to the School. Subject to School support, this request will be referred to the Graduate Research Board for decision. **Notes:*** Students should communicate with their Principal Supervisor as soon as is reasonably possible if they believe an extension is necessary
* Students should ensure that they read section 3 (Pre-Thesis Submission: Extension Request to Submission Deadline, Leave of Absence and Extension of Graduate Research Registration) in the [Guidelines for Preparation, Submission, Examination and Dissemination of Research Degree Theses](https://www.ucd.ie/graduatestudies/t4media/Guidelines_Preparation_Submission_Examination_Dissemination_Research_Degree_Theses_September_Oct24.pdf) before completing this form
* Students should be approaching the end of the maximum period of registration for their programme, [as outlined in Academic Regulations 7.9-7.12, 8.12 & 9.10](https://hub.ucd.ie/usis/%21W_HU_MENU.P_PUBLISH?p_tag=GD-DOCLAND&ID=123)-9.11, in order to be eligible for an extension
* Information regarding the submission deadlines for graduate research theses is available on the [Fees and Grants section of the Registry website](https://www.ucd.ie/students/fees/thesis/)

 Electronic signatures are to be used. |
|  **Student Name** |  | **Student No.** |  |
| **Programme****Title** |  | **Programme****code** |  |
| **Programme****Start Date** |  | **School** |  |
| **Name of Principal****Supervisor** |  | **Name of****Head of School** |  |
| **Duration of Extension (by trimester)**  |  |  **New submission**  **date** |  |
|  **Are you seeking an exemption from fees for this period? Yes □ No □***Please note that ‘no-fee’ extensions are typically granted for one trimester only* |
| **Briefly outline how your circumstances have impacted your planned thesis submission. If a fee exemption is sought, then a statement from a Supervisor or Head of School must be provided. This statement should describe how circumstances have impacted your research and confirm that a plan of completion, within the timeframe sought, is in place. This statement can be provided below or submitted to the School as an accompanying document.**  |
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| **Please include your contact details below:** |
| **Phone/Mobile:** |  |
| **Email Address:** |  |
| **Permanent****home address:** |  |
| **The following electronic signatures are required:** |
| **Student:** |  |
| **Principal****Supervisor:** |  |
| **Head of****School:** |  |
|  **School Office Use:**  **Referred to Graduate Research Board on DD MM YY.**  |



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