**Application to extend full-time research student status**

This form should be returned to [headadminGS@rvc.ac.uk](mailto:headadminGS@rvc.ac.uk) to confirm funding and get Head of Graduate School approval.

|  |  |  |  |
| --- | --- | --- | --- |
| Student name: |  | Department: |  |
| Start date: |  | Current end date: |  |

|  |
| --- |
| Period of requested extension (please give exact dates): |
|  |
| Justification for extension, including reasons for the project not being completed in the original time. |
|  |
| Please give a plan setting out the proposed timescale for completion. (This can be attached on a separate sheet) |
|  |

Are there sufficient funds to extend this studentship and has this been discussed with the Research Office **Yes/No**

|  |  |
| --- | --- |
| Signature of Supervisor: |  |
| Signature of Student: |  |

**Graduate School/Research Office use only:**

|  |  |  |
| --- | --- | --- |
| Source of stipend for extension (grant code): | |  |
| Source of tuition fees for extension (grant code): | |  |
| *If the supervisor is not the grant/budget holder, permission from the grant/budget holder must be provided below:* | | |
| Name of grant holder: | Signature of grant holder: | |

|  |  |
| --- | --- |
| Approved by Head of Graduate School: |  |

|  |  |  |
| --- | --- | --- |
|  | Completed by: | Date |
| SITS dates changed: |  |  |
| Finance notified: |  |  |
| Tuition fees invoiced: |  |  |