FORM UPR12

Application for Extension of Registration



Please complete and return the form to your First Supervisor

Postgraduate Res	Research Student (PGRS) Information			Student ID:			
PGRS Name:							
Department:	Fir		First Supervisor:				
Study Mode and Route:		Part-time		MPhil		MD	
		Full-time		PhD		Professional Doctorate	

PhD, MPhil & MD students may apply for 6 months or 1 year. Prof Doc students may apply for 6 months, 1 year, 18 month or 2 years. An extension of up to 6 months in length would be charged at 50% of the extension fee, an extension beyond 6 months in length would be charged at 100% of the extension fee (<u>Tuition Fee Policy</u> at

https://kb.myport.ac.uk/Article/Index/12/4?id=2230)

Extension Requested					
Date From:		Date To:			

Exceptional Extension Requested (Please attach a written statement detailing the reason for an Exceptional Extension)						
Date From:		Date To:				

Reason for Extension Request (for reporting purposes only)						
Further research and work required		Writing up only				

Signatures:

The signatories listed below must see and acknowledge this form by inserting a JPEG electronic signature at picture icon(s) or attaching email confirmation.

PGRS:			Date:	
First Supervisor:			Date:	
Departmental Research Degrees Coordinator:			Date:	
Chair, Faculty Research Degrees Committee			Date:	
Only once signed by the Chair, FRDC, please send to researchdegrees@port.ac.uk				