

Application for Extension to Candidature

To enable this electronic form, you must first **SAVE** it then **REOPEN** as a PDF file (it will not function properly when used in a browser window).

The Application for Extension to Candidature form is to be completed by the Research Candidate for approval and submitted no later than three weeks prior to the census date of the maximum candidature period.

Please refer to the [Higher Degree by Research Policy](#).

1. Student Details

Title First Name Last Name

Student ID number Email

Domestic candidate International candidate (onshore) International candidate (offshore)

If you are an international candidate who is studying onshore in Australia, what date does your visa expire?

Course Details

Course Code Course Name

School Faculty <select>

Session Commenced Session at which Maximum Candidature reached (4 years Full-Time Equivalent e.g 201730)

Supervisory Team

Principal Supervisor

Co-Supervisor/s

Request for Extension

To extend your candidature an additional session of enrolment is required. Please indicate the additional session you are seeking to be enrolled in.

Proposed enrolment details, please select:

Full-time/Part-time study Mode of study (On campus/Online)

Is this your first application for an extension to candidature ? Yes No

If NO, please indicate the additional session/s that have been previously approved for extension of candidature. (Note: for any subsequent extension requests a draft thesis must accompany this application)

When do you expect to submit your thesis for examination?

Please state the reason/s why you will not be able to submit your thesis by your maximum candidature period. In making your case, please refer to any issues previously noted in your progress reports and supply supporting documents where appropriate. (Attach additional pages if required)

Reasons:

Request for Leave

Are you requesting a period of leave in addition to your extension to candidature? Yes No

If yes, for which session/s?

Reason:

Have you previously taken an approved Leave of Absence? Yes No

If yes, for which session/s?

Note: Normally, a Leave of Absence will not be approved for a Higher Degree by Research candidate who has exceeded the maximum duration of candidature, please refer to the [Higher Degree by Research Policy](#).

Plan for Thesis Completion

List Tasks
Completed:

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Tasks to be completed:

Date for completion:

	Tasks to be completed:	Date
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>

Any additional comments

Comments:

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Approvals and Authorisations

PLEASE NOTE: This is an electronic form and requires the below authorisations in the order they appear. After each authorisation this report needs to be emailed to the next signatory by clicking the 'submit by email to next signatory' button and entering in the next recipient's email address. For any queries about this form please contact the [Research Office](#).

Student:

I hereby apply for this Extension of Candidature

If you do not have an electronic signature, you may create one in the signature field below.

Name Signature Date:

Principal Supervisor: I support this request I do not support this request

Please comment on the candidate's progress and feasibility of the proposed timeline for completion.

Comments:

Name Signature Date:

Graduate Studies Representative to confirm student information from page 1 is accurate:

Maximum Candidature Number of Previously Approved Additional Sessions of Candidature

Candidature:

Draft Thesis Required and Provided - only applies to candidates who have already had previous additional candidature

Leave:

Sessions of Leave Evidence of exceptional circumstances received

Sub / Associate Dean (Graduate Studies):

I support this request I do not support this request

Comments:

Name Signature Date:

Director, Research:

I approve this request for an Extension to Candidature with a revised thesis submission date of :
(should be next appropriate census date)

I approve this request for a Leave of Absence

I decline this request and propose alternate action as below:

Comments
and further
conditions (if
applicable):

Name

Signature

Date: