

Research Degree Registration Extension

Before completing this application form, please read the following notes:

- 1. Extensions up to a maximum of one year are permitted for both full-time and part-time students. The request must be made in multiples of 3 months (minimum 3 months, maximum 12 months) and approved by both the supervisor and the Director of Doctoral Studies.
- 2. Students will need to pay a fee of £125 for their first extension, in addition to the tuition fee.
- 3. If a student has already had the maximum permitted amount of extension, in exceptional circumstances a further period of extension may be approved by the Dean of the Doctoral School. To request an exceptional period of extension, please use the 'Exceptional Circumstances Extension Request' form, available at the following link: https://www.sussex.ac.uk/rsao/forms/.
- 4. If you are in receipt of a Federal Direct Loan, this request may have an impact on your funds. Please seek advice from the Financial Aid Office before proceeding (usfinancialaid@sussex.ac.uk)

SECTION A – To be completed by the student

Name	:		Reg. No. :			
School	:		Mode of attendance	:		
Degree Programme	:					
Correspondence Address (PLEASE TYPE OR PRINT CLEARLY)	:					
Previous Extension G	Franted	:				
Reason for Extension	n Request	:				
Are you an overseas clearance?	student on a c	□ Yes □ No				
Funding Status: Self-funded	☐ Stude	ent Loan (SFE)	□ UKRI/Researd	ch Council Funded		
Please check one box (please note if a box i checked, this request be approved)	s not cannot	leral Direct Loan durin	and have not been in	receipt of a United		

_engt	h of exte	nsion requ	ested:							
	3 mo	onths		6 months		9 month	S		12 mc	onths
Sign	ed	:					Date	:		
		(Student)					ı			
• 4:										
Secti	on B – T	o be com	pleted	by the supervi	sor					
I reco	mmend	that the stu	udent b	e permitted an e	extension	of his/he	r researc	h deg	ree regis	stration period.
Sign	ed	:					Date	:		
		(Main sup	pervisor	r)			1			
SECT	TION C -	To be co	mplete	d by the Direct	or of Do	ctoral Stu	udies			
App	roval is g	jiven for ar	extens	sion of registrati	on as foll	ows:				
	3 mont	hs		6 months		9 mo	nths			12 months
☐ Full-time ☐ Part-time ☐ Pr				Pre-s	re-submission status					
Sign	ed	:					Date	:		

(Director of Doctoral Studies or MAH Doctoral convenor)

Once completed, please could the REC return this form to the Student Records Team