

Application to extend Milestone 5 – Thesis submission Masters by Research and Doctoral Degrees

This form is to be completed for extensions to candidature only.
Please return the approved form to researchassessments@ecu.edu.au.

SECTION A: TO BE COMPLETED BY CANDIDATE

Candidate Given Name(s):		Family Name:	
Student Number:		Schools / Teaching Area:	Select
Course Level:	Select		
International Student Visa Expiry Date:			

Number of previous extensions to Milestone 5:		Total number of previous extensions to all milestones:	
Extension From (date):			
Extension To (date):			
Enrolment type:	<input type="radio"/> Full Time		<input type="radio"/> Part Time
I am a scholarship recipient and want to be considered for a scholarship extension (maximum of 6 months)	Select	Extension of Scholarship Tenure Revised End Date	

Please outline the reasons why the research has been delayed:

NOTE: You must attach a Progression Plan with this application. For further information, refer to the [Guideline: Progression Plan](#)

I have attached a copy of my Progression Plan, which has been discussed and approved by my supervisor(s).

I understand that if my extension is approved:

- I will be placed on Red status due to my requirement to enter a Progression Plan (in accordance with section 4.6 of the University's [Admission, Enrolment, and Academic Progress Rules](#)); and
- If I do not submit within the extension period, I will be excluded from the course.

International Candidates: I have discussed this application and its implications with a Student Success Officer in the Student Hub:

Name of Student Success Officer:		Date of Meeting:	
Signature of Student Success Officer:			

CANDIDATE DECLARATION

Signature of Candidate:		Date:	
-------------------------	--	-------	--

SECTION B: TO BE COMPLETED BY PRINCIPAL SUPERVISOR

I confirm that all supervisors involved in the candidature support this application.

Tick to confirm

To assist the Associate Dean Research in considering this application, you are requested to provide a comprehensive statement on the progress the candidate has made toward their research.

SUPERVISOR NAME	SIGNATURE	DATE

SECTION C: ENDORSEMENT BY ASSOCIATE DEAN RESEARCH (ADR)

Extension to candidature approved:

YES

NO

Subject to the conditions set out below:

Candidature extended to (date):		
ADR NAME	SIGNATURE	DATE

Please return the approved form to researchassessments@ecu.edu.au.

SECTION D: TO BE COMPLETED BY THE RESEARCH ASSESSMENTS OFFICE

Administrative encumbrance	Yes	No
Milestone updated in Callista	Yes	No
Candidature extension note added to CORPTS	Yes	No