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AI-generated content may be incorrect.

**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**](mailto:researchassessments@ecu.edu.au)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **SECTION A: TO BE COMPLETED BY CANDIDATE** | | | | | | | |
| Candidate Given Name(s): | Click or tap here to enter text. | | | Family Name: | | Click or tap here to enter text. | |
| Student Number: | Click or tap here to enter text. | | | School: | | Choose an item. | |
| Course Level: | Choose an item. | | | | | | |
| International Student Visa Expiry Date: | | | Click or tap to enter a date. | | | | |
| Number of previous extensions to Milestone 5: | Click or tap here to enter text. | | | Total number of previous extensions to all milestones: | | | Click or tap here to enter text. |
| Extension From: | Click or tap to enter a date. | | | | | | |
| Extension To: | Click or tap to enter a date. | | | | | | |
| Enrolment type: | Full Time | | | Part Time | | | |
| I am a scholarship recipient and want to be considered for a scholarship extension (maximum of 6 months) | | |  | Extension of Scholarship Tenure Revised End Date | | | Click or tap to enter a 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](https://intranet.ecu.edu.au/research/higher-degree-by-research/forms-policies-and-guidelines). | | | | | | | |
| Click or tap here to enter text. | | | | | | | |
| **International Candidates:** I have discussed this application and its implications with a Student Success Officer in the  Student Hub: | | | | | | | |
| Name of Student Success Officer: | | Click or tap here to enter text. | | | Date of Meeting: | | Click or tap to enter a date. |
| Signature of Student Success Officer: | |  | | | | | |
| **Candidate Declaration** | | | | | | | |
| 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, and if I do not submit within the extension period, I will be excluded from the course. | | | | | | | |
| CANDIDATE SIGNATURE: |  | | | | DATE: | | Click or tap to enter a date. |

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| **SECTION B: TO BE COMPLETED BY PRINCIPAL SUPERVISOR** | | | | |
| I confirm that all supervisors involved in the candidature support this application. | | | | |
| 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. | | | | |
| Click or tap here to enter text. | | | | |
| Click or tap here to enter text. |  | | | Click or tap to enter a date. |
| SUPERVISOR NAME | SIGNATURE | | | DATE |
|  | |  | |  |
| **SECTION C: ENDORSEMENT BY ASSOCIATE DEAN (RESEARCH) OR NOMINEE** | | | | |
| Extension to candidature approved: | | YES  NO | | |
| Subject to the conditions set out below: | | | | |
| Click or tap here to enter text. | | | | |
| Candidature extended to: | | Click or tap to enter a date. | | |
| Click or tap here to enter text. | |  | | Click or tap to enter a date. |
| ASSOCIATE DEAN (RESEARCH) NAME | | SIGNATURE | | DATE |
| **Please return the approved form to** [**researchassessments@ecu.edu.au**](mailto:researchassessments@ecu.edu.au)**.** | | | | |
| **SECTION D: TO BE COMPLETED BY THE RESEARCH ASSESSMENTS OFFICE** | | | | |
| Administrative encumbrance | | |  | |
| Milestone updated in Callista | | |  | |
| Candidature extension note added to CORPTS | | |  | |