

**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**

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| **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 theStudent 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 |
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| **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****.** |
| **SECTION D: TO BE COMPLETED BY THE RESEARCH ASSESSMENTS OFFICE** |
| Administrative encumbrance |[ ]
| Milestone updated in Callista |[ ]
| Candidature extension note added to CORPTS |[ ]