

OFFICE FOR RESEARCHER TRAINING, QUALITY AND INTEGRITY
Application for Extension Form

This form must be completed to obtain approval for a Pre-Extension to Candidature/Late Submission Date or Extension to Submit Amended Thesis/Extension to submit an amended thesis for classification to gradresearch@vu.edu.au **NB: ORTQI will arrange Institute Deputy Director approval.**

1. Candidate Details

| | | | |
|----------------|----------------------|-------------|----------------------|
| Title: | <input type="text"/> | Surname: | <input type="text"/> |
| Given Name(s): | <input type="text"/> | Student ID: | <input type="text"/> |
| Degree: | <input type="text"/> | | |
| Institute: | <input type="text"/> | | |

2. Type of Request
 Pre-Candidature Extension
 Late Submission Date*

**All candidates who are within 2 months of reaching their maximum duration of candidature date must request a late submission date.*

 Extension to Submit Amended Thesis for Thesis Classification**
 Extension to Submit for Re-Examination**

*** Applications to be submitted 2 weeks prior to the expiry date. Normally no more than 3 additional months will be granted.*

3. Current Enrolment Status

Please tick your current status and Study Mode

 Local candidate
 International candidate
 Full Time
 Part Time

Please note: International candidates applying to extend their candidature may need to apply for an extension to their [Confirmation of Enrolment](#) (eCoE). For further information contact VU Enrolments Department via askvu.vu.edu.au

4. Supporting Documentation

Please attach the following supporting documentation. Medical certificates may be attached where appropriate.

- A letter outlining in detail the specific circumstances leading to this request
- A Supporting Letter from your Supervisor
- A revised timeline in the form of a Gantt chart, (excludes applicants applying to Submit Amended Thesis for Classification/Re-Examination)

Applications without the above documentation **will not** be considered.

5. Approval of Request

| | | |
|----------------------------------|-----------------------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Candidate's Name | Signature of Candidate | Date |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Principal Supervisor's Name | Signature of Principal Supervisor | Date |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Institute Deputy Director's Name | Signature of Deputy Director | Date |

(Where the Principal Supervisor is also the Institute Deputy Director, then the Institute Director or their nominee is required to sign)

| | |
|------------|-------|
| Signature: | Date: |
|------------|-------|