# **PGR Extension Request Form**

Students may apply for an Extension during either the Continuation/Writing-up Period, or after the Examination, where their ability to submit has been impacted by exceptional mitigating circumstances. All requests must be formally approved by the Divisional Director of Graduate Studies, and must be accompanied by sufficient evidence.

**PLEASE READ THIS APPLICATION GUIDANCE BEFORE COMPLETING SECTION 1 OF THE FORM**

Please note that the [Regulations for Research Courses](https://www.kent.ac.uk/education/regulatory-framework/academic-regulations-for-research-courses) state that students are required to submit their thesis within a maximum period of 5.5 years for full-time students or 8.5 years for part-time students. If any extension takes the initial or subsequent submission of the thesis beyond this threshold, further approval will be required from the Director of the Graduate and Researcher College.

Students may submit an application for any the following extensions:

* Extension to a submission deadline beyond the Continuation Period / within a Further Writing-Up Period
* Extension to a submission deadline for Minor Corrections or Major Revisions
* Extension to a Resubmission deadline
* Permission to submit thesis beyond the maximum time allowed (in addition to one of the above)

Extensions to initial submission are usually granted up to a maximum of 6-months, while extensions to submit Corrections/Revisions and to Resubmissions should be limited to 3-months maximum.

**Financial Implications**

Extension periods are chargeable, please refer to the Miscellaneous Fees scale at: <https://www.kent.ac.uk/finance-student/fees/tuition/2024/index.html#!mi>

If you are in receipt of a foreign loan or scholarship, please contact [foreignloans@kent.ac.uk](mailto:foreignloans@kent.ac.uk) or [scholarships@kent.ac.uk](mailto:scholarships@kent.ac.uk) for advice prior to submitting your application for clarification that the extension will not impact any existing arrangements.

**Student Visa**

If you are attending on a UKVI student immigration arrangement, you are advised to contact [visacompliance@kent.ac.uk](mailto:visacompliance@kent.ac.uk) prior to submitting your application to clarify how an extension will impact your current visa arrangement. The Student Immigration Compliance Team will routinely be notified when the extension period approved.

**Additional Advice and Guidance**

Should you need any additional advice, please contact [Kent Union Advice Service](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fksu.co.uk%2Fhere-for-you%2Fadvice&data=05%7C02%7CA.J.Whiffen%40kent.ac.uk%7C1e5b1575a8794cb0c3b508dcaca47b38%7C51a9fa563f32449aa7213e3f49aa5e9a%7C0%7C0%7C638575069646230448%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0%7C%7C%7C&sdata=hK%2FaQdrKbMuSkpNA5%2FubbAKJjeQD5%2FKT2edwfKBg1O0%3D&reserved=0).

## Section 1 – to be completed by the Student

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First Name: |  | | Last Name: |  |
| Email Address: |  | | Kent ID No.: |  |
| School: |  | | Division: |  |
| Award: (eg MA-R/MSc-R/MPhil/PhD) |  | | Course Title: |  |
| Course Start Date: |  | | Course End Date: |  |
| Supervisor(s): |  | | Mode of Attendance: | Full-Time  Part-Time |
| Funder (if applicable): |  | | Student Visa (Previously Tier 4): | Yes  No |
| Extension Start Date: |  | | Number of Months Extension Requested: |  |
| Reason for Extension: | Extension to a submission deadline beyond the Continuation Period or within a Further Writing-Up Period  Extension to a submission deadline for Minor Corrections or Major Revisions  Extension to a Resubmission deadline  Permission to submit thesis beyond the maximum time allowed (in addition to one of the above) | | | |
| A timetable for completing the thesis agreed with the supervisor: |  | | | |
| List dates and reasons for any previous intermissions and/or extensions: | *DATES* | *REASON* | | |
|  |  | | |
| **Declaration:** *I confirm that all details and declarations given above are full and accurate and (if applicable) the supporting evidence is attached.* | | | | |
| Student: | e-signature:  Date: | | | |

## Section 2 – to be completed by the Supervisor

|  |  |
| --- | --- |
| Please comment on each element of the student’s statement in Section 1: | |
|  | |
| Declaration: *I have reviewed this proposal, and (if applicable) have considered the attached evidence. I confirm approval of the above student’s extension application* | |
| Supervisor: | Print name and e-signature:  Date: |

## Section 3 – to be completed by the Divisional Director of Graduate Studies

|  |  |
| --- | --- |
| Please comment on the application and state the period of extension approved: | |
|  | |
| Declaration: *I have reviewed this proposal, and (if applicable) have considered the attached evidence. I confirm approval of the above student’s extension application* | |
| Divisional Director of Graduate Studies: | Print name and e-signature:  Date: |

## Section 4 – to be completed by the PGR Admin Team, should this request take the student beyond the maximum period to submit (5.5 years for full-time, 8.5 years for part-time)

|  |  |
| --- | --- |
| Actions: | |
| Approved by the Director of the Graduate and Researcher College (via SharePoint) | |
| PGR Admin Team: | Print name:  Date: |