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**APPLICATION FORM**

**University funding extensions**

This form can be completed and submitted electronically, but if you are completing this form by hand, please use BLOCK CAPITALS. The completed form should be passed to the Doctoral College.

**1. General details of the student’s current registration**

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| **Surname** Click or tap here to enter text. | **Student Number** Click or tap here to enter text. |
| **Full Forenames** Click or tap here to enter text. | **Main funding source** Click or tap here to enter text. |
| **Department/School** Click or tap here to enter text. | **Degree currently registered for**  (e.g. MPhil, PhD) Click or tap here to enter text. |
| **Lead supervisor** Click or tap here to enter text. | |
| **Current mode of study** (please tick the appropriate box(es))  Part Time  Full Time  Industrially/ Externally based  Staff A  Staff B | |
| **Start date of registration**  Click or tap to enter a date. | **Current end date of registration**  Click or tap to enter a date. |
| **Start date of funding** Click or tap to enter a date. | **Current end date of funding** Click or tap to enter a date. |

**2. Specific details relating to this request**

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| **Length of funding extension requested** Choose an item. |
| **Start date of funding extension** Click or tap to enter a date. |
| **If funding extension is approved, do you want your registration end date to be extended as well?**  Choose an item. |
| **Justification for extension request**  Click or tap here to enter text. |
| **Other mitigations considered or applied**  Click or tap here to enter text. |

**3. For the Lead supervisor to complete**

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| **How was the project re-planned in the light of COVID and will the extension funds allow the project to achieve the re-planned goals?**  Click or tap here to enter text. |
| **Was there disruption to planned laboratory/fieldwork as a result of COVID?**  Choose an item. |