



MA7 THESIS EXTENSION AND SUSPENSION REQUEST FORM

Please familiarise yourself with the Thesis Regulations on extensions and suspensions/leave of absence prior to submitting this form. Note that additional fees will be charged if a student is granted a formal extension. See the Tuition Fees Regulations and Schedule for current details of the thesis extension charges. Please submit this form to the Academic Registrar, registrar@carey.ac.nz.

SECTION A: Student and Thesis Details

Student Name

Student ID Number

Course number (indicate)

Enrolment status (indicate)

MA901 (90 credit, 30,000 words)

MA902 (120 credit, 40,000 words)

Full-time

Part-time

Supervisor/s

Title of thesis

Due date of thesis

day month year

SECTION B: Student request for extension/suspension

Note that formal extensions can be granted once only for periods of full months up to a maximum of six months, and additional fees will be charged for approved extensions.

A suspension/leave of absence can be granted for a maximum period of 12 months.

Number of months requested

New submission date proposed

day month year

Indicate the primary reason you are applying for an extension/suspension

Medical/Health

Financial

Personal

Other

Please explain why you are requesting this extension/suspension and confirm that you have attached evidence to support your request. Requests for an extension must include evidence of your satisfactory progress to date, and a proposed timetable for completion if the extension is granted. The timetable must include monthly goals which will be closely monitored by your supervisor.

SECTION C: Supervisor to complete

Please provide a brief comment on the request for an extension/suspension:

I confirm that the Student is making satisfactory progress and that an extension/suspension as proposed is appropriate.

Yes No

SECTION D: Signatures

Signature of Student

signature

day month year

Signature of Supervisor

Approved Yes No If yes, new date for submission:

signature

day month year

day month year

SECTION E: Approvals

OFFICIAL USE ONLY

The requested extension is approved.

The requested extension is approved, but with revised submission date:
for the reason given below.

day month year

The requested extension is not approved for the reason given below.

Reason

Extension Fee of \$

applies.

Invoice sent on:

day month year

Signature of Academic Director

signature

day month year