



THE NATIONAL UNIVERSITY *of* SINGAPORE
Graduate Studies Division
Faculty of Arts and Social Sciences

**Application for Extension of Candidature
for Graduate Coursework Students**

- (1) This application form should be submitted **at least three months** before the expiry date of the current maximum candidature. The candidature will be considered to have lapsed once the maximum candidature period has passed.
- (2) If your candidature has lapsed, a reinstatement of candidature will be considered only if there are compelling reasons.
- (3) If you would like to request a reinstatement of candidature, please submit the following:
 - (a) A letter to the Vice-Dean (Graduate Studies) through the Head of Department/Programme; and
 - (b) A duly completed copy of this form.
- (4) Applications for reinstatement of candidature must be submitted **within 12 months** from the expiry date of the maximum candidature. Applications submitted **12 months after** the candidature has lapsed will not be considered.
- (5) If reinstatement is approved, an administrative fee of **S\$250** will be charged.
- (6) Requests are considered on a case by case basis and only with compelling reasons.
- (7) The maximum period that can be requested for each application is one year.
- (8) The last day of the approved period will be the last day of the month.

Section A: To be completed by STUDENT & submitted to supervisor(s)			
Name (Mr/Miss/Mrs/Mdm/Dr*):		Registration No:	
Degree Registered:		Department:	
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time If part-time, state effective date of conversion from full-time to part-time, if applicable:			
Date Admitted (DD/MM/YYYY):		Date of Maximum Candidature (DD/MM/YYYY):	
Extension(s) of Candidature previously granted:	From (DD/MM/YYYY)	To (DD/MM/YYYY)	[No. of Month(s)/Year(s)]
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Extension now required: _____			
Reasons for applying for extension: (attach separate sheet if necessary)			
_____ _____ _____			

Section A (cont'd): To be completed by STUDENT

Detailed work schedule for completion of remaining modules during period of extension requested (attach separate sheet if necessary):

Semester	Number of modules	Comments
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Student's Signature

Date

Declaration by Student

I hereby declare that this will be my final request for an extension.

Student's Signature

Date

Section B: HEAD OF DEPARTMENT/GRADUATE COORDINATOR to comment and send to ASST DEAN (Graduate Studies)

(Tick relevant box)

Supported **Not Supported**

Comments if any:

Head's/Graduate Coordinator's Name & Signature

Date

Section C: To be completed by ASST DEAN (Graduate Studies)

(Tick relevant box)

1. If cumulative period of extension previously granted & presently requested is \leq 2 years [] Approved [] Not Approved
2. If cumulative period of extension previously granted & presently requested is $>$ 2 years [] Supported [] Not Supported

Comments if any:

Asst Dean's Name & Signature

Date