

### APPLICATION FOR EXTENSION OF NUS RESEARCH SCHOLARSHIP/TUITION FEE ALLOWANCE

**Important Notes**

- Application form should be submitted at least 2 months before the expiry of the financial assistance.
- Students who had received two (Masters) or four (PhD) full years of NUS Research Scholarship (RS) will not be considered for an RS extension. However an extension in the form of a Tuition Fee Allowance (TFA) may be considered.
- \* To delete as appropriate

<b>PART 1:</b>	<b>To be completed by Student</b>		
<b>Student's particulars</b>			
Name:		Student No.:	
Department:		*Degree: Masters / PhD	
*Current Source of Finance: LKCGS / PGF / RS / TFA			
Start date of award (DD/MM/YYYY):		End date of award (DD/MM/YYYY):	
Have you received or will be receiving two (Masters) or four (PhD) full years of funding?			*Yes / No
Have you been on unpaid leave of absence before?			*Yes / No
If you have been on unpaid leave of absence before, please state the start and end dates of your leave:			
Start date of leave (DD/MM/YYYY):		End date of leave (DD/MM/YYYY):	
Please indicate if you are applying for an extension of the NUS RS <b>OR</b> TFA (select one only)			*RS / TFA
Please state the period of extension required (DD/MM/YYYY for RS <b>OR</b> Sem/AY for TFA):			
Reason(s) for extension (attach a separate sheet if necessary):			
Detailed workplan (attach a separate sheet if necessary):			
<u>Period</u>	<u>Activity</u>		
Signature of student:			Date:

<b>PART 2:</b>	<b>To be completed by Supervisor</b>
I *recommend/do not recommend the *RS / TFA extension.	
Expected date of thesis submission for examination:	
Comments:	

Signature of supervisor:	Name of supervisor:	Date:
Signature of co-supervisor:	Name of co-supervisor:	Date:

<b>PART 3:</b>	<b>To be completed by Head/Programme Coordinator or nominee</b>
I *support / do not support the * RS / TFA extension	
Comments:	
Signature of Head/Programme Coord.:	Date:
Name:	

<b>PART 4:</b>	<b>To be completed by Vice-Dean/Assistant Dean (Graduate Studies)</b>
I *approve / do not approve the * RS / TFA extension	
<i>Please check the appropriate box:</i>	
<input type="checkbox"/> Extension of Research Scholarship	Period of extension granted:        months
<input type="checkbox"/> Extension of Tuition Fee Allowance	Indicate semester & academic year: Sem        AY
Comments:	
Signature of Vice-Dean/Assistant Dean:	Date:
Name:	