

Supervisor(s):

Supported

Not Supported

Reasons for student needing extra time:

Factors which were beyond the control of the student:

Actions taken by the School/ Discipline to help minimise the delay:

Signature (Principal Supervisor)

Signature (Co-Supervisor)

Signature (Co-Supervisor)

Printed Name

Printed Name

Printed Name

Date

Date

Date

Postgraduate Co-ordinator or Head of Discipline / School:

Supported

Not Supported

*Signature of Head of Discipline/ School OR Postgraduate Co-ordinator** (**Delete as appropriate*) **Date:** _____

Printed Name

AGC Use Only:

Recommandation: _____

Signature: _____ Date: _____