

Stipend Scholarship Extension Application Form

Higher Degree by Research (HDR)

Please read this section before you commence the following form:

To be completed by PhD students approximately 8 weeks prior to their current scholarship expiry date, after a tenure of three years (or equivalent). Masters students are not eligible to have their scholarship extended beyond 2 years. Applications submitted after the scholarship expiry date, if approved, may result in an interruption in scholarship payments.

Eligibility Criteria:

For PhD candidates an extension of **up to** an additional **six months** may be considered - ie up to a total of three and a half years (the maximum extension period of up to 6 months for full-time students and up to 12 months for half-time students). Should half-time students change their attendance status during any approved extension period, the scholarship expiry date will be reduced accordingly.

Such an extension would only be granted where it can be demonstrated that inability to complete the degree within three years was caused by **academic** circumstances beyond the control of the student and related directly to his or her studies.

Delays and time lost included in this application must correspond with delays and time lost as documented in Annual Reviews of Progress. The only exception being if the delay occurred after the last Annual Review of Progress, in which case, the application must clearly state this, including time lost. All extensions are subject to the consideration and approval of the Graduate Scholarships Committee.

Illness, preparation of publications (excluding PhD by Publication), work commitments and carer responsibilities are not considered as grounds for extension and should be addressed by use of the leave of absence, sick leave or half-time study provisions (refer to the Conditions of Award for your scholarship for further information).

Australian Postgraduate Award Industry Scholars: For holders of these awards from Linkage Projects granted prior to 2011, all extension applications must be accompanied by letters of support from the Chief Investigator and all Industry Partners. Please be aware, that ARC may take at least 8 weeks to process extension requests.

Name: _____ ID Number: _____

School/ Discipline: _____

Name of Scholarship(s): _____

Current Scholarship Expiry Date: _____

Please indicate: PhD Conventional ☐ PhD by Publication ☐ Combined Conventional/Publication ☐

I wish to apply for an extension of my scholarship for a further period of _____ months.

I have included with my application:

- ☐ a statement below which outlines the reasons for the application;
- ☐ a time-line detailing remaining tasks requiring completion in required extension period; and
- ☐ supporting comments from my Principal Supervisor(s) and the Postgraduate Coordinator or Head of Discipline/ School. (Additional pages may be included if required.)

(Without all of these documents your extension request cannot be processed)

Student Request (Reason(s) for the Application)

Academic Delays recorded in my First Annual Review of Progress:

- Days lost (based on a 7 day week): _____
- Brief summary of reason for delay(s):

AGC OFFICE USE: academic delays verified: _____

Academic Delays recorded in my Second Annual Review of Progress:

- Days lost (based on a 7 day week): _____
- Brief summary of reason for delay(s):

AGC OFFICE USE: academic delays verified: _____

Academic Delays recorded in my Third Annual Review of Progress (if applicable):

- Days lost (based on a 7 day week): _____
- Brief summary of reason for delay(s):

AGC OFFICE USE: academic delays verified: _____

Academic Delays recorded since I submitted my most recent Annual Review of Progress:

- Days lost (based on a 7 day week): _____
- Brief summary of reason for delay(s):

AGC OFFICE USE: Academic delays supported by Principal supervisor: _____

Principal Supervisor Endorsement

Reasons for student needing extra time:

Factors which were beyond the control of the student:

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

Student Signature: _____

Supervisor and School approval:

Principal Supervisor's name

Sign here

Date

Post-Graduate Co-ordinator/
School/Discipline name

Head of Sign here

Date

**Return the completed form with all required attachments to the
Adelaide Graduate Centre
Level 2 Schulz Building
University of Adelaide SA 5005
Email: scholarships@adelaide.edu.au**

For AGC Use Only

- ☐ Annual Reviews checked and academic delays verified
- ☐ Check intended submission date on Intention to Submit Form (if applicable)
- ☐ Approved: _____ New Expiry date: _____
- ☐ OR Reason application denied: _____

Assessor's Signature

Date

www.adelaide.edu.au/graduatecentre/scholarships/

Further Information

Ph: (08) 8313 5882

Fax: (08) 8313 5725

Email: scholarships@adelaide.edu.au