**PGR Short Self-certified End Extension Form**

# Please complete this form and email it to [PGRinterruptions@hud.ac.uk](mailto:PGRinterruptions@hud.ac.uk).

Please note:

* This form is for an end extension to your thesis submission deadline of 10 working days, however you can submit your thesis sooner if you are able to.
* You do not need to provide evidence in support of your application, but you must provide a reason.
* This is designed to be an emergency support mechanism for unforeseen issues that impact you immediately before your thesis submission. We will not accept any applications received more than 10 working days prior to your thesis submission deadline. You cannot self-certify and then apply for an end extension for the same submission point.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student name:** | | |  | | | | | | | |
| **Student Number:** | | |  | | | | | | | |
| **School:** | | | Select your school | | | | | | | |
| **Degree:** | | | Select your degree | | | | **Mode:** | | | FT  PT |
| **Supervisor names:** | | |  | | | | | | | |
| What stage are you in? | | | | | Writing up  Completing Corrections | | | | | |
| What is your current submission deadline? | | | | | Select date | | | | | |
| Are you studying on a Student Visa? | | | | | Yes\*  No | | | | | |
| \*If you are an international student on a Student (or Tier 4) visa, and the length of your extension will take you beyond the expiry of your visa, you will be required to make a new Student visa application at your own expense prior to the expiry of your current visa. | | | | | | | | | | |
| What is the reason for this extension request? | | | | | | | | | | |
| Health reasons | |  | | Personal difficulties | | | |  | | |
| Bereavement | |  | | Other (please explain below) | | | |  | | |
|  | | | | | | | | | | |
| I confirm that:   * I have read and understood Section 7.7 of the [End Extension Procedure](https://www.hud.ac.uk/registry/current-students/pgr/ext-inter/ext/procedure/); * If I have a Student Visa, I understand that I may need to extend my visa as a result of applying for an extension to the writing-up period; * I am responsible for checking what effect this extension will have on any funding or sponsorship I receive. | | | | | | | | | | |
| Signed: |  | | | | | Date: | | | Select date | |
| We accept electronic signatures if you send this form from your University email account. You do not need to print, sign and scan your form. | | | | | | | | | | |