



**RECOMMENDATION**

**TO: The Research Higher Degree Sub-Committee**

**FROM: Convenor of \_\_\_\_\_**

**SUBJECT: EXTENSION OF TIME TO SUBMIT THESIS FOR INITIAL EXAMINATION for:**

Candidate's Name \_\_\_\_\_

Student Number \_\_\_\_\_

Course Name \_\_\_\_\_ FT/PT (*delete one*)

Candidature expires on \_\_\_\_\_

The above-mentioned student has requested an extension of time of

..... Semester(s) to end Semester ....., 20 .....

I recommend \*\* that this request be granted.

**Please attach an action plan.**

I do not recommend ++ that this request be granted.

**++ Please provide reason/s.**

Signed \_\_\_\_\_ Date \_\_\_\_\_  
**Supervisor**

Signed \_\_\_\_\_ Date \_\_\_\_\_  
**Convenor, Faculty Research Group**

Signed \_\_\_\_\_ Date \_\_\_\_\_  
**Sub-Dean, Research Students**