

REQUEST TO EXTEND A DOCTORAL STUDIES PERIOD

PERSONAL INFORMATION

Family name, name		NID/passport	
Doctoral programme			
Postal address for notifications (street number and name)			
Town/city	Postal code	Province/region	Country
Email address		Telephone	

I DECLARE: 1. In the academic year.....-..... I requested admission to the aforementioned doctoral programme in the following study mode:

- part-time full-time

2. I submitted my doctoral thesis proposal in the academic year-....., under the title , supervised and tutored by:

- supervisor (S1):
- co-supervisor (S2):
- tutor:

I REQUEST: That, for the following motives:

I be granted the following type of extension to the period in which I complete my doctoral studies:

- | | |
|---|--|
| <input type="checkbox"/> first extension | <input type="checkbox"/> first extension |
| <input type="checkbox"/> second extension (exceptional circumstances) | <input type="checkbox"/> second extension |
| (full-time study mode) | <input type="checkbox"/> third extension (exceptional circumstances) |
| | (part-time study mode) |

[Signature]

As witnessed in Barcelona, [day/month/year]

The Academic Committee of the Doctoral Programme

hereby authorizes the interested party to complete the following type of extension to the period in which he or she completes the doctoral degree:

- first extension
- second extension (exceptional circumstances)

(full-time study mode)

- first extension
- second extension
- third extension (exceptional circumstances)

(part-time study mode)

[Signature]

..... [name and surnames]

President of the Academic Committee of the programme

As witnessed in Barcelona, [day/month/year]