

EXTENSION TO MAXIMUM PERIOD OF STUDY FORM

This form should be used to submit a formal application to the Registry. Before completing this form you should read the Code of Practice on Leave of Absence Procedures on the UCB website. This form must be submitted **as soon as possible** to the Registry alongside the relevant evidence, Registry aim to process and respond within 10 working days of receipt of the application.

1.	Full Name:	Student ID:	
2.	Programme title:	School/Dept:	
3.	Email address and contact number: (please note these details will be used by the Registry to contact you for further evidence if required):		
	Email: Contact Number:		
4.	Correspondence Address:	Date of entry into this programme of study:	
5.	Have you ever had a previous extension?		
	Yes/No (delete as applicable)		
	If Yes, please give details, including dates and brief reasons (i.e. medical, financial, etc)		

6.	Detail below the reasons for requesting a Leave of Absence:		
	Please refer to Section 4 of the Code of Practice on Leave of Absence Procedures:		
	Medical Compassionate/Bereavement Financial Hardship		
	Personal Major unforeseen circumstance Competitive Sports		
	Other		
7.	Please state why you have not been able to complete within the maximum period of study for your programme of study (maximum 500 words)		
8.	If you were not able to submit your request before the expiry of the maximum period of study please provide an explanation as to why this was not submitted at the appropriate time		
9.	Supporting evidence attached (e.g. medical certificate, financial evidence)		
9.	Supporting evidence attached (e.g. medical certificate, financial evidence) Yes No		
9.			
9.	Yes No		
9.	Yes No		

10. Please provide a detailed Work Plan outlining the below:

 Details of modules still to be completed with submission/assessment dates
 Details of any re-submission/re-assessment dates

 For more substantial pieces of work (e.g. dissertation)

 Details of the work still to be completed
 Details of work completed so far
 Timeline for completion and final submission date

 Work Plan attached Requests will not be considered without

□ I confirm that I have read and followed the Code of Practice on Leave of Absence Procedures and understand the implications of taking leave of absence and that it is my responsibility to notify the University of my wish to return prior to the proposed date of return.

Signed:	Date:

Return to: Registry University College Birmingham Summer Row BIRMINGHAM B3 1JB

Or scan and e-mail to: registry@ucb.ac.uk

(if e-mailing, please ensure that all documentation and evidence is attached)

For Office Use only:					
Date form received:					
Approved:	Signed:	Date:			
Rejected:	Signed:	Date:			
Restart Date:					
Reasons for Approval/Rejection and if work plan is achievable:					

Work Plan

Please provide an outline of modules still to be completed with submission/assessment dates
(including re-submission and re-assessment)
For more substantial pieces of work (e.g. dissertation)
 Details of work completed so far
Details of the work still to be completed
 Timeline for completion and final submission date

The details given on this form will be kept in accordance with Data Protection Legislation. The information given will be used for the sole purpose of processing extension to study applications. The data will be stored on a secure database and the form will be kept secure and destroyed after a period of 7 years. No personal information will be shared with any third party without your permission. UCB's privacy notices and Data Protection policy can be found at http://www.ucb.ac.uk/about-us/data-protection-resources.aspx