

**REQUEST FOR EXTENSION IN DOCTORAL STUDIES**

(Plans regulated by the Royal Decree 99/2011)

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| DATA OF THE APPLICANT AND OF THE DOCTORAL PROGRAMME | |
| Name and surname: | |
| ID card: | E-mail: |
| Name of the Doctoral Programme: | |
| I **REQUEST** the EXTENSION of my doctoral studies, considering my condition:  Full-time Part-time  1st extension (1 year)  1st extension (2 years)  2nd extension (1 year)  2nd extension (1 year)  Please attach the explanatory document that justifies the need to extend the stay in the programme. | |

In\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_

Signature of the applicant,

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| RESOLUTION OF THE ACADEMIC COMMISSION OF THE PROGRAMME (of the 1st extension) |
| The Academic Commission of the Doctoral Programme  at its meeting held on agreed to authorise/deny the stated 1st extension.  at its meeting held on agreed to authorise/deny the 2nd extension.  The Coordinator of the Doctoral Programme  Signature: |
| RESOLUTION OF THE INTERNATIONAL DOCTORAL SCHOOL (of the 2nd or exceptional extension) |
| The Direction of the Doctoral School, on this date, agreed to authorise/deny the exceptional extension.  The Director of the Doctoral School Signature: |