

## Request for Extension of Registration Period

Please complete all sections in block capitals and black ink.

<b>Section 1: Your Details</b>			
Surname:		First name(s):	
Student number:		Campus/site of study:	
Full course title:			
<b>Contact details for next three months for correspondence relating to your application</b> (please note that most communication will be via email to the addresses provided):			
University email address:			
Alternative email address:			
Postal address:			
Daytime Telephone Number:			

<b>Section 2: Current Registration Details</b>			
Current Registration Start Date:		Current Registration End Date:	
State reason for requesting an Extension to Registration			

**Once you have completed sections 1 and 2 you must return the form to programme Administration.**

<b>Section 3: Programme or Course Leader Approval (this section should be completed following discussion with the student)</b>	
Proposed amended Registration End Date:	
Have any professional body requirements/regulations been fully considered:	
Programme of Study:	
Name of Course / Programme Leader (Please Print)	
Details of any additional arrangements required (e.g. date of placement):	
Signature	
Date	

**Section 4: Student checklist (please tick all the boxes and sign the declaration below)**

- I have fully completed sections 1 and 2. If all required information has not been supplied your form may be returned to you without consideration.
- I have discussed this with my programme leader.

Student's Signature:		Date:	
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Once sections 1 and 2 are complete, please return this form to:

Programme Administration – [programmeadmin@cumbria.ac.uk](mailto:programmeadmin@cumbria.ac.uk)  
Academic Registry  
University of Cumbria  
Lancaster  
LA1 3JD

**Section 5: Department Dean Confirmation of Outcome**

Proposed amended Registration End Date:	
Details of any additional arrangements required (e.g. date of placement):	
Extension Approved	Yes                      No
If denied please give rationale:	
Head of Teaching and Learning/Dean/Director of Institute as appropriate (Please Print)	
Signature	
Date	

**FOR OFFICE USE ONLY:**

Date form received:	
Logged by:	
Extension of Registration Approved	Yes                      No
Date Confirmation Sent to Student	