

Application to go overtime

For international research degree students

- ① Before completing this form please consult the guidelines for Application to go overtime which can be found at:
<https://i.unisa.edu.au/students/research-students/student-forms/>

PART 1: PERSONAL DETAILS

| | |
|---------------|---|
| Student ID | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| First Name | <input type="text"/> |
| Family Name | <input type="text"/> |
| Academic Unit | <input type="text"/> |
| Program | <input type="text"/> |

PART 2: OVERTIME DETAILS

| | |
|---|---|
| Expected thesis submission date | <input type="text"/> |
| Reason for going overtime | <input type="checkbox"/> Medical grounds (<i>Medical certificate required</i>) |
| | <input type="checkbox"/> Extra time to complete research due to unforeseen delays – International Student Visa Holders must provide compassionate/compelling circumstances to support request |
| | <input type="checkbox"/> COVID-19 impact (<i>You must attached the COVID-19 impact record</i>) |
| | <input type="checkbox"/> Do you wish to apply for a COVID-19 fee waiver ? (<i>Note: applications will be assessed by a panel and the fee waiver is not guaranteed</i>) |
| | <input type="checkbox"/> Other - International Student Visa Holders must provide compassionate/compelling circumstances to support request |
| Please provide the reasons for your application to go overtime/ if you require fee support. | |
| <i>Please attach a sheet should space be required</i> | |

For students studying in Australia on an international student visa

- ①
- Some of the changes arising from this request may result in a revised Confirmation of Enrolment (CoE) which could affect your student visa for more information visit <https://i.unisa.edu.au/students/research-students/student-forms/>

PART 3: CONFIRMATION OF ENROLMENT (CoE)

| | | |
|--|------------------------------|-----------------------------|
| Will you require a new Confirmation of Enrolment to support this overtime request? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <p>①</p> <ul style="list-style-type: none"> Please contact Graduate Research, Student and Academic Services to discuss what additional information you may need to submit with this form in order to support your new CoE Phone +61 (0)8 8302 5880 or email research.students@unisa.edu.au | | |

PART 4: SPONSOR SUPPORT

| | | | |
|------------------------------|------------------------------|-----------------------------|--|
| Are you a sponsored student? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <i>If yes, please seek and attach written approval from your sponsor</i> |
|------------------------------|------------------------------|-----------------------------|--|

PART 5: CHECKLIST & STUDENT DECLARATION

In signing this form I;

- ☐ Confirm I have read and understood the information on Application to go overtime at <https://i.unisa.edu.au/students/research-students/student-forms/>
- ☐ Have attached documentation to support the reason/s for my request *(if applicable)*
- ☐ Have attached my updated progress plan (if applicable have also attached my COVID-19 Impact record)
- ☐ Have obtained *and* attached approval from my sponsor *(if applicable)*
- ☐ Have attached any additional documentation to support a new Confirmation of Enrolment as per my discussion with Graduate Research *(if applicable)*
- ☐ Have attached a detailed study plan to support my new expected thesis submission date as noted in PART 2 of this form.
- ☐ I have attached '[Application to extend a scholarship](#)' form *(if applicable)*
- ☐ Understand that this request is provisional until confirmation is received from Graduate Research, SAS

| | | | |
|-------------------|--|------|--|
| Student Signature | | Date | |
|-------------------|--|------|--|

① You must now seek approval from your supervisor in **PART 6**

PART 6: SUPERVISOR SUPPORT

| | | |
|-------------------------------|------------------------------|-----------------------------|
| Overtime request supported? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fee waiver request supported? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

① Please complete a '**Progress Plan**' with the student to detail how they will complete their thesis by the date nominated in **PART 2**

Statement of support: please complete

| | | | |
|----------------------|--|------|--|
| Supervisor Name | | | |
| Supervisor signature | | Date | |

PART 7: RESEARCH EDUCATION PORTFOLIO LEADER (REPL) (or equivalent) STATEMENT AND SUPPORT

| | | |
|---|------------------------------|-----------------------------|
| Overtime request supported? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fee waiver request supported? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Statement of support: please complete | | |
| | | |
| <i>Please attach a sheet should space be required</i> | | |
| REPL (or equivalent) Signature | | Date |

PART 8: DEAN OF RESEARCH APPROVAL (OR DELEGATE)

| | | |
|--|------------------------------|-----------------------------|
| Overtime request supported? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Fee waiver request supported? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Statement of support: please complete | | |
| | | |
| Dean of Research (or delegate) Name | | |
| Dean of Research (or delegate) signature | | Date |
| Staff Use: Please submit this form to Graduate Research - SAS via email research.students@unisa.edu.au | | |