



Academic Supervisor Support

The following participant has applied for an extension to his/her period of registration on the MSc:

Participant: _____

Period requested: _____

Please complete the following indicating your level of support for this request:

1. Frequency of contact with candidate over the previous 2 years:

2. Proportion of research completed:

3. Proportion of dissertation completed (or number of chapters):

4. How much of the draft dissertation have you been asked to review? What is the quality of that work?

5. What level of support do you give to the candidate for this request? (i.e. strong, moderate, weak, none)

Support student's extension

Not support student's extension

Endorsed by Academic Supervisor: _____ Date: _____

Approved by Associate Director of IGDS Studies: _____ Date: _____