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| **London Arts & Humanities Partnership****Research Extension Fund**Application Form | **CHECKLIST**[ ]  Has supporting documentation been attached?[ ]  Have you signed the form?[ ]  Has your Supervisor endorsed and signed the form? |

**Please read the Regulations carefully before completing this form. Please TYPE or complete in BLOCK capitals. Please complete all sections. Incomplete applications will be returned.**

1. Personal Details

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| Title:       | First name:       | Family name:       |
| Department:       |
| Address (for correspondence):      | Email:       |
| Tel. no:       |

Please give details of your current research degree registration:

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| --- | --- | --- | --- | --- | --- |
| CurrentDegree | Subject | Date ofRegistration | Full or Part-time | Funding end date | Full name of Principal Supervisor |
|       |       |       |       |  |       |

Please give the title / provisional title of your thesis:

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2. Proposal

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| Purpose (i.e. specialist training, internship, international placement, study in another subject area; disrupted access to archives, field sites or other, etc.):       |
| Location:       | Date from:       | To:       |
| Length of requested extension (up to 6 months): |
| **Please explain how the proposed extension/placement will benefit your thesis or enhance research and/or employability opportunities. If applying for a disrupted access related extension, please explain the basis of the disrupted access to archives, field sites, or equivalent:**      |
| Signature of applicant: | Date:       |
| **STUDENTS:** Please pass this form to your Supervisor for endorsement.  |

3. Supervisor’s Endorsement

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| Applicant’s full name (please print):       |
| Department:       |
| Full name of Supervisor (please print):       |
| Supervisor’s department (for correspondence):      | Email:       |
| Tel:       |
| **Supporting Statement:**Please explain how the proposed extension will benefit the student’s thesis or enhance research and/or employability opportunities. If the student is applying for a disrupted access related extension, please explain the basis of how the student’s access to resources or sites has been disrupted:      |
| Signature of Supervisor: | Date:       |

Please send your complete application to info.lahp@london.ac.uk