**Request for Extension in Hostel Stay at NUST – PG Students**

I Mr/Ms \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ confirm and certify that I have not been able to complete my degree during the stipulated time period of on campus study therefore I make a request to the competent authority to allow me additional six months as per NUST PGP letter no 0920/05/Extension Hostel/PGP dated 27 March 2013 to complete my degree. I also certify that (1) I am not employed anywhere.

(2) I have completed my Covid-19 vaccination.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1st Extension |  | | 2nd Extension |  |
| Date \_\_\_\_\_\_\_\_\_\_ | | Signature of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  School program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Regn Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Completion of on campus study\_\_\_\_\_\_\_ | | |

**COUNTERSIGNED BY SCHOOL/INSTITUTE AUTHORITY**

**It is certified that student: -**

1. **Has not completed the degree program.**
2. **Has completed more than 50% (in case of first extension)/  
   80% (in case of second extension) work on thesis.**
3. **Is not employed.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sign of Supervisor**

**Date:\_\_\_\_\_\_\_\_\_\_\_**

**Recommended/Not Recommended**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**S/HoD**

**Date: \_\_\_\_\_\_\_\_\_\_**

**Countersigned**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dean SEECS**

**Date: \_\_\_\_\_\_\_\_\_\_**

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Please deposit the application form duly signed by all concerned at Info Office, SEECS for further processing.***