



FACULTY OF  
MEDICINE

PROLONGATION OF EMPLOYMENT AS DOCTORAL STUDENT

The Higher Education Ordinance stipulates in paragraph 5:7 the grounds for prolongation of employment. *Prolongations of the employment due to leave of absence because of illness, leave of absence for service in the defence forces or an elected position in a trade union or student organisation, or parental leave, or teaching are handled primarily by HR staff at the department.*

**This form is to be used for applications of prolongations due to delays that are beyond the control of the supervisor and the PhD student (such as the delayed studies).**

Please note that for all delays and prolongations, it is very important to document these in the individual study plan.

I hereby apply for a prolongation of doctoral employment during the time period from \_\_\_\_\_ until \_\_\_\_\_ with a total of \_\_\_\_\_ number of weeks.

The reasons for the delay in my PhD studies are:

The following measures have been taken in order to minimize the risk of delays in the PhD studies:

Describe the need of a prolongation and why the outcomes cannot be achieved within the regular time frame of the program.

Describe in what way the prolongation will be used to achieve the outcomes. If a prolongation is approved, the individual study plan needs to be revised and include the description below.

# Certificate

The supervisor certifies available financing for prolonging the employment.

Date \_\_\_\_\_

Date \_\_\_\_\_

Signature PhD student

Signature main supervisor

\_\_\_\_\_

Name

\_\_\_\_\_

Name

\_\_\_\_\_

Civic registration number PhD student

\_\_\_\_\_

The application, signed by the PhD student and the supervisor, should be sent to the Deputy Head of Department where the PhD student is employed. For contact information, please see the following web page:

[https://www.med.lu.se/english/intramed/teaching\\_research/phd\\_students\\_supervisors/contact#FU-prefekter](https://www.med.lu.se/english/intramed/teaching_research/phd_students_supervisors/contact#FU-prefekter).

## DECISION

Application for prolongation is approved

Application for prolongation is denied

Reasons for denial

**Date of decision**

**Deputy Head of Department, signature**

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