**Application for extension of a doctoral employment due to leave and assignments**

After the allocated period of employment – which for most doctoral students is 4 years – the doctoral employment can be extended if there are special reasons, such as:

* sick leave[[1]](#footnote-1)
* parental leave1
* caring for a sick child (vab)1
* approved leave of abscence1
* approved departmental duties (e.g. teaching or administration own or another department)
* trade union work
* student union work (e.g. assignment as a student representative in committees, boards, supervisors' colleges or during quality dialogues).

The doctoral student shall submit the application form to faculty secretary Kristina Arnrup Thorsbro, either via email (krstina.arnrup\_thorsbro@kansliht.lu.se), via internal mailing (Kansli HT, code 30) or regular mail (Box 192, 221 00 Lund).

Please note that the application form must be signed by both the supervisor for the doctoral student, and the director of studies to be considered complete.

**Information about the doctoral student**

Social security number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current employment expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Ground for assessment of possible right to extension due to leave and assignment:**

1. Any prior advance notices of extension (YES or NO)

*Attach advance notice(s).*

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2. Any sick leave during the doctoral employment period (YES or NO)

*Please make sure that all sick leave is registered and approved in Primula.*

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3. Any parental leave and care for a sick child during the doctoral employment (YES or NO)

*Please make sure that all parental leave and care for a sick child is registered and approved in Primula.*

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4. Any approved leave of absence during the doctoral employment (YES or NO)

*The dean for third-cycle studies must have decided that the leave of absence grants extension. Please make sure that the leave of absence is registered and approved in Primula.*

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5. Any approved departmental duties during the doctoral employment (specify period(s))

*The faculty secretary must have decided about approved departmental duties.*

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6. Any trade union or student union assignments during the doctoral employment (YES or NO)

*Attach a list of all assignments (including. period and scope of time for each assignment), and minutes/certificates).*

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**The doctoral student’s signature:**

City and date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Verified by supervisor:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Verified by director of studies:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Absence that must be registered and approved in Primula to constitute ground for extension. [↑](#footnote-ref-1)