



Grantee Information		
Researcher Name:		
Agency/Program :		
Account No#:		
Type of extension reque	ested	
Deferral of Installment		Postpones an installment by 1 year/12 months
Extension (Time)	\Box	Provides an additional 1 year/12months to the end date
Maternity or Parental Leave		Time equivalent to the leave period. See below for additional documents
Medical Leave		Time equivalent to the leave period. See below for additional documents
Other		Please specify Click here to enter text.
Additional Document	s Requ	<u>sired</u>
authorized representative	period dditiona	of Maternity or Parental Leave signed by a University al installment at the existing funding level can be requested, be provided to NSERC.
Medical Leave		of the Medical Leave signed by a University authorized
Complete, sign, and subm	it this fo	r to the OOR: office.of.research@concordia.ca
Signature		Date

Grant Extension Requests normally take approximately two weeks to complete depending on the agency. Longer processing times may occur from factors such as complexity, completeness of information, and response time of all parties involved.