

REQUEST FOR EXTENSION FORM



This form should be completed by students seeking an extension and must be submitted prior to the lodgement date of an assignment. It must be submitted to the staff member responsible for the class or subject. Assignments submitted late without an extension having been granted will incur penalties. Please refer to: <http://www.education.unimelb.edu.au/currentstudents/resources/latesubmission.html>

This section to be completed by student and retained by staff member.

Extension requested by:

Student Name		Id No.	
Address			
		Postcode	
Phone BH		Phone AH	Mobile
Email Address			

Details

Course Title			
Subject Number			
Subject Name			
Assignment Title			
Staff member from whom extension is sought			
Original Due Date		Proposed Due Date	
Reason(s) for requesting extension			

Submission Details and Signature

Is supporting evidence attached? (eg medical certificate)			
Signed (student)			
Extension Approved			
Date of Application		New Due Date	
<p>The extension period will in no case exceed two weeks unless a formal application for special consideration has been lodged online and the application approved. To apply for Special Consideration, go to: https://sis.unimelb.edu.au/cgi-bin/special-consideration.pl</p>			

This section to be completed by staff member and retained by student.

Student Name:			
Subject/Component:			
Extension granted to (new date)		Extension not granted	
Signed (staff member)		Date:	