

REQUEST FOR EXTENSION



- All requests are to be made at least **5 working days** in advance, and handed in to the Office.
- The completion of this form **does not** guarantee an extension. The Academic Office will inform you of the outcome of your request.

Student's Name _____	Date of Request _____
Subject _____	Lecturer _____
Description of Assignment _____	
Current Due Date _____	Requested Due Date _____
Reason(s) for request for extension _____	

This section for Faith Bible College office use only:

<i>Your request for extension for the above assignment</i>	<input type="checkbox"/> has been approved. You are required to hand in the assignment to the Office by _____
	<input type="checkbox"/> has not been approved. You are required to hand in the assignment on the actual deadline initially set by the Lecturer.
Date returned to student _____	From the Academic Office: _____
<i>When approved, please attach this form to your assignment when it is submitted.</i>	

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