

# EXTENSION

To be completed by the Applicant and given to the subject teacher or HOD

Surname: \_\_\_\_\_ First Names: \_\_\_\_\_

Form Class: \_\_\_\_\_ Subject Name \_\_\_\_\_ Teacher code \_\_\_\_\_

No. of Standard: \_\_\_\_\_ Name of Standard: \_\_\_\_\_

Assessment Title & Date: \_\_\_\_\_

*The reasons for requiring an extension are:*

*Date assessment due* \_\_\_\_\_

*The date I would prefer to submit this assessment on is* \_\_\_\_\_

In the box below list supporting documentary evidence (e.g. medical certificate, police report in the event of an accident, bereavement notice, letter from parents) and attach to this form.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

**Extension Granted : Rejected**  
**Amended Due date for assessment** \_\_\_\_\_

Signed:

HOD \_\_\_\_\_ Date: \_\_\_\_\_

Assessment Coordinator \_\_\_\_\_ Date: \_\_\_\_\_

Student \_\_\_\_\_ Date: \_\_\_\_\_

**Where an extension is granted this form must be attached to the assessment when it is submitted for marking**