

# Application for Extension of Assessment Item



Extensions for assessment items must first be approved by the unit lecturer before the assessment is due. It will only be approved for legitimate reasons, such as medical issues or other extenuating circumstances, and all such applications must be accompanied by the relevant supporting documentation. Please refer to the current Student Handbook for more details.

***If this application affects an in-class or final exam, where an assessment is taken under exam conditions, a supplementary exam will need to be scheduled. Please liaise with your unit lecturer to find a suitable time to arrange a supplementary exam.***

Student Number	
Student Name	
Unit Code & Name	
Unit Lecturer	
Assessment Task or Assignment Title	
Original Due Date	

## Checklist

- |   |   |
|---|---|
| 1. Supporting Documentation attached (e.g., Medical Certificate)  | <input type="checkbox"/> No <input type="checkbox"/> Yes  |
| 2. Existing Arrangements/Circumstances (i.e., 'Arrangements' refer to Special Consideration which has been granted to a student who have a physical, medical, and/or psychological condition) | <input type="checkbox"/> No <input type="checkbox"/> Yes  |
| 3. Other: (please specify)  | <input type="checkbox"/> N/A <input type="checkbox"/> Yes |

## Declaration

*I declare that the information on this form is, to the best of my knowledge, correct and complete in every detail. I have read, understood, and agree to the College's refund policy, and the Rules and Regulations outlined in the Student Handbook. I understand that the details provided are protected by the Privacy and Personal Information Act 1998 (NSW).*

Student Name			
Signature		Date	

If approved, this sheet will be returned to you, and must be attached to your assessment item. All documentation provided to the College regarding your Application will remain confidential.

## Office use only

Unit Lecturer	Application for Extension: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
	Reasons: (Optional)	
	Number of working days extended:	Extended due date:
	Signature:	Date Signed:
	<input type="checkbox"/> Copy of outcome retained	<input type="checkbox"/> Relevant lecturer/tutor notified