

REQUEST FOR AN EXTENSION OF TIME OR  
ALTERNATE DATE



Student Name: \_\_\_\_\_ Homeroom: \_\_\_\_\_

Date of Request: \_\_\_\_\_

Course: \_\_\_\_\_

Teacher: \_\_\_\_\_

Task No: \_\_\_\_\_

Task Due Date: \_\_\_\_\_

Task Nature:  
\_\_\_\_\_  
\_\_\_\_\_

Reasons for an Extension of Time or Alternate Date:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Date Requested: \_\_\_\_\_

Supporting Evidence:  Medical Certificate  
 Letter of Explanation

*I declare that all the information supplied is true.*

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

Parent/Carer Signature: \_\_\_\_\_

**Studies Coordinator Recommendation:**

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**Signed:** .....

**Date:** \_\_\_\_\_

**Subject Teacher's Recommendation (if applicable)**

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**Signed:** .....

**Date:** \_\_\_\_\_