Application for an Extension

Student to complete this section			
Full student name	**Whānau Group**		**Date**
		Name of Head of Faculty: **Name of Teacher:**	
Standard number:	**Standard title:**		**Credits:**
Assessment taks: (briefly describe i.e. online test, written report, filmed performance...)			
Date of the Assessment or Due Date:			
Reason for Missing Assessment (tick one) Illness (attach a medical certificate) ☐ Family/Personal Trauma (attach a letter from caregiver/Counsellor/Dean ☐			

Now take this form and attached letter to the relevant Head of Faculty

Head of Faculty to complete this section:	
Extension Granted Yes/No	New Due Date:
New Assessment Date Granted: Yes/No	New Assessment Date:
Application Denied: Yes/No	Reason:
Head of Faculty Signature:	

The reason for this decsion has been explained to me and I accept the decision. Student signature:

Now return this form to Ms de Ras.