



## SCHOOL OF BEHAVIOURAL SCIENCE EXTENSION REQUEST

### INSTRUCTIONS FOR STUDENTS:

1. ALL extension requests require documentation to support your extension request
2. Extension requests should be made prior to the date the piece of assessment is due.
3. Complete Parts A and B and take the form to the Psychology Office on the 12th Floor, Redmond Barry Building
4. Please allow up to 5 days for processing. (Processing may be expedited in special cases). **Do not** assume that your extension request will be automatically granted. You **must** collect the reply slip before submitting the work and attach it to the front of your work.
5. Reply slips will be available for collection from the Psychology Office.

### A. PLEASE PROVIDE DETAILS OF THE SUBJECT

Subject Code: \_\_\_\_\_ Lab Class: \_\_\_\_\_

Subject Name: \_\_\_\_\_

### B. PLEASE COMPLETE:

NAME: \_\_\_\_\_ STUDENTNO: \_\_\_\_\_

PHONE NO: \_\_\_\_\_ LAB CLASS: \_\_\_\_\_

I would like to apply for an EXTENSION for (piece of assessment) \_\_\_\_\_

DUE DATE: \_\_\_\_\_ LECTURER/TUTOR: \_\_\_\_\_

I would like the extension to be for \_\_\_\_\_ day/s, i.e., until \_\_\_\_/\_\_\_\_/\_\_\_\_

For the following reason: \_\_\_\_\_

(Students giving ill health as a reason should present a medical certificate (copy and original) and/or covering letter to the Psychology Office).

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### C. OFFICE USE ONLY:

[PROCESSED BY: NAME: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_]

Extension is  granted  not granted  until Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### STUDENTS RECORD:

**PLEASE STAPLE THIS SLIP TO THE FRONT OF YOUR WORK**

NAME: \_\_\_\_\_ STUDENT NO: \_\_\_\_\_

Your request for an extension for \_\_\_\_\_

due on \_\_\_\_\_ has been granted  not granted .

Your work is now due \_\_\_\_/\_\_\_\_/\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**STUDENTS PLEASE NOTE: Your work should be submitted on the new due date into the appropriate posting box.**