

To be completed by the applicant and given to the HOD.

Surname:
First name(s):
House class:
Standard number:
Standard name:
Assessment title:
My reason(s) for requiring an extension are:
List supporting documents (medical certificate, police certificate, a letter from a guidance counsellor, or bereavement notice, reporting in the event of an accident) and submit or attach to this form.
Due date: I would like an extension until:
Student signature:
Date:
Extension granted/declined:
If declined, provide reason and refer to DP Head of Curriculum if further action is required.
Amended due date/time:
HOD Signature:
Date:
Student signature:
Date:

Once completed and signed by HOD and student, the student will receive a copy of this document. The HOD will store it with the other documents and completed work for this standard.