



This form is to be used for an Assessment Extension Request of 5 working days or less.

For an Extension Request of more than 5 working days, please complete the Special Consideration Application form.

- A student may apply for an extension of the due date of an assessment task of up to 5 working days if circumstances beyond their control prevent them from completing the task on time.
- Requests must be lodged with the relevant **Tutor/Lecturer** at least 2 days BEFORE the due date for the assessment.
- You will be notified of the outcome of your request via your ACPE email address, within 2 working days.
In the meantime, you must make every attempt to complete the task on time, should your request be denied.

Personal Details

Student ID No.	<input type="text"/>	Daytime contact phone number	<input type="text"/>
Given Name	<input type="text"/>	Family Name	<input type="text"/>
Course Name	<input type="text"/>	Mode of Study (Online or On Campus)	<input type="text"/>

Unit & Assessment Details

Unit Code	<input type="text"/>	Unit Name	<input type="text"/>
Tutor/Lecturer Name	<input type="text"/>		
Assessment Task Name and No.	<input type="text"/>		
Assessment Task Due Date	<input type="text" value="D D / M M / Y Y Y Y"/>	Requested Extension Date (must be <u>no more</u> than 5 working days)	<input type="text" value="D D / M M / Y Y Y Y"/>
Have you started the task:	Yes / No (Circle one)	NOTE: Evidence of the work you have already started on your assessment task must be attached to this application.	

Reason for Extension Request

Please provide a brief explanation of the reasons for your extension request.

<p>.....</p> <p>.....</p> <p>.....</p>
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Student Declaration

<input checked="" type="checkbox"/>	I declare that the information provided by me on this form is true and correct.		
<input checked="" type="checkbox"/>	I have attached evidence of the work I have already started on my assessment task. (if applicable)		
Student Signature	<input type="text"/>	Date	<input type="text" value="D D / M M / Y Y Y Y"/>

Authorisation Section (To be completed by Tutor/Lecturer)

<input checked="" type="checkbox"/>	Extension Approved	New Due Date	<input type="text" value="D D / M M / Y Y Y Y"/>	New Due Time	<input type="text" value="H H / M M am/pm"/>
<input checked="" type="checkbox"/>	Extension Denied	Reason for denial:			
Further Comments/Instructions		<input type="text"/>			
Tutor/Lecturer Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text" value="D D / M M / Y Y Y Y"/>
<input checked="" type="checkbox"/>	Assessed form completed by tutor/lecturer and outcome emailed to student.	<input checked="" type="checkbox"/>	Copy of assessed form sent to Academic Support Officer.		