

APPLICATION FOR EXTENSION  
Due no later than the last week of the semester

I. STUDENT

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Semester: \_\_\_\_\_ Year \_\_\_\_\_

Course Number \_\_\_\_\_

Course Title \_\_\_\_\_

Instructor Name \_\_\_\_\_

Reasons for Extension \_\_\_\_\_  
\_\_\_\_\_

II. INSTRUCTOR

Work to be Completed \_\_\_\_\_  
\_\_\_\_\_

Deadline Date \_\_\_\_\_

Course Grade if Work is Not Completed: \_\_\_\_\_

III. CONTRACT

This form is considered to be a contract. If work is not completed by the deadline, the course grade automatically is changed to the grade specified above.

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

\_\_\_\_\_  
Instructor Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Vice President of Academic Affairs Signature \_\_\_\_\_ Date \_\_\_\_\_