



Nature Care College

ASSIGNMENT EXTENSION REQUEST FORM

Assignments without the correctly completed Extension Form, will lose five percent (5%) of the mark for each day they are late.

A. STUDENT TO COMPLETE

Student Name: _____

Student Number: _____

Address: _____

Contact Number: _____

Unit of Study: _____

Term: _____ Year: _____

Assignment Topic: _____

Due Date: _____

Reason for Extension:

All assignment extensions that have been approved will have 10% deducted off the final mark for each week they are overdue.

This deduction may be waived depending on specific extenuating circumstances, determined by your Lecturer and the Curriculum & Training Manager.

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This fully completed form must be submitted to your Lecturer, with proof, no later than 72 hours before the assignment is due. The amount of time granted is approved on a case by case basis by your Lecturer and/or the Curriculum & Training Manager.

B. LECTURER TO COMPLETE

Lecturer use only

Proof sighted

Extension granted until: _____

Extension not granted

Reason:

Insufficient proof

Not an extenuating circumstance

Other (please specify): _____

Lecturer's Name: _____

Date: _____