

Application for Extension Assessment other than Examination

| Step 1 | STUDENT TO COMPLETE | |
|------------------------|--|-------------------------|
| | Name: | Date request submitted: |
| | Class: | |
| | Due date of assessment: | Subject: |
| | Name of Assessment: | |
| | Reason for extension: | |
| | | |
| | Documentary evidence attached: | YES / NO |
| | Student's Signature | Parent/Carer Signature: |
| OL TEACUED TO COMPLETE | | IED TO COMPLETE |
| Step 2 | TEACHER TO COMPLETE | |
| | Work effort during set preparation time: | |
| | | |
| | Number of lessons missed: | |
| | General Comment: | |
| | | |
| | | |
| | Teacher's Signature | |
| 8 | FACULTY HoD TO COMPLETE | |
| Step 3 | | TO COIVII LETE |
| | Approved | Date Now Due: |
| | Not Approved | 2 |
| | Comments: | |
| | | |
| | Entered on OneSchool 2 | Date: |
| | | |
| | | |
| | Faculty HoD's Signature | |