



St. Ursula's College

Application for assignment extension – Senior School (Year 11 and 12 students)

(Request must be made at least 3 school days prior to due date.)

Date of application: _____

Name: _____ Year level: _____

Subject: _____ Teacher: _____

Assignment task: _____

Reason for extension (please check)

- Medical reasons *(certificate attached)*
- Other *(please provide details and/or attach evidence)*

Task distributed on: _____ Task due date: _____

Parent/Guardian signature: _____ Student signature: _____

Teacher to complete

Checkpoint date/s: _____ Draft or conference date: _____

Satisfactory/unsatisfactory evidence of work completed at this time.

Further information to support decision: _____

Teacher signature: _____ Date: _____

Head of Department to complete & notify Deputy Principal (Teaching and Learning) for AARA application

Extension granted. Adjusted due date: _____

Extension denied. _____

Head of department signature: _____ Date: _____

Copy affixed to student response. Copy uploaded to TASS

Copy given to Deputy Principal AARA submitted to QCAA portal