**Application for Assessment Task Extension Letter Logo

Description automatically generated**

***Student to Complete***

*(Insert date)*

Dear *(Insert teacher’s name)*

I am writing to request an extension of*(number of days required)*for the *(insert name/description of assessment task)* that is due on the *(insert due date).*

The reason why I am requesting an extension is *(insert reason why you require an extension. Acceptable reasons include: sickness or family emergency. Unacceptable reasons include: work, sport or normal family commitments. Evidence to support extension application should also be attached such as a medical certificate or note from parent/guardian)*

I assure you that I will submit my assessment by the requested date and understand that failure to do so will result in late submission penalties being applied as per the Pinjarra Senior Highschool Assessment Policy.

Thank you for considering my request.

Kind regards

*(Insert your/student name)*

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***Teacher to Complete***

**Has an extension been granted? Yes No**

**Conditions of extension**

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**Teacher’s signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_