



SCHOOL OF CULTURE AND COMMUNICATION

Ph 8344 5506/7/8

Application for Extension of Time for Written Work

NAME _____

STUDENT NUMBER: _____

CONTACT PHONE NUMBER: _____

EMAIL ADDRESS: _____

NAME OF SUBJECT: _____

NAME OF TUTOR: _____

TUTORIAL TIME AND DAY: _____

DUE DATE: _____

REASON(S) FOR APPLICATION: *(Please attach supporting documentation, if any).*

• If this extension application is for the final essay of this subject you MUST also complete an application for Special Consideration. NO EXTENSION CAN BE GRANTED FOR A FINAL ESSAY WITHOUT SPECIAL CONSIDERATION BEING LODGED AS WELL. The web address for the lodgement of Special Consideration is

<http://www.arts.unimelb.edu.au/courses/sc/>

AUTHORISATION:

Approved YES NO New Submission Date _____

Signature _____ Date _____
Tutor/Lecturer in Charge (for Head of School)

This approved application is to be attached to your essay when you submit it