

Student Services

Request for Time Extension for Completion of Term Work

This form is to be used for term work to be completed subsequent to the end of a course. This form is not to be used to request an alternate final examination. Complete the first section and submit this form to your instructor.

Maximum Extension Deadlines

Requests for periods of longer than two weeks should be discussed with the Program Coordinator prior to approval being granted.

THIS SECTION TO	BE COMPLETED BY THE	STUDENT			
Student Last Name: First (Given) Name: Course Name: Course Number: Section Number:				Student No. CRN:	
Course taken in:	Fall 20	Winter 20	Summer 20		
Instructor Name:					
Reason for request:					
Description of work to be completed:					
Original assessment du	e date:				
Student's Signature: Date:					
Your personal information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of processing your request for a time extension. Your personal information will not be used or disclosed for other purposes, unless permitted by The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.					
THIS SECTION TO BE COMPLETED BY THE PROGRAM INSTRUCTOR					
Time extension has bee	n: Approved	Denied			
Comments:					
Signature:				Date:	
THIS SECTION TO BE COMPLETED AND THE STUDENT'S RECORD UPDATED BY STUDENT SERVICES					
Comments:					
Signature:				Date:	