

The Brisbane North Institute of TAFE is collecting information on this form in accordance with the Information Privacy Act 2009. The institute is collecting the information on this form to consider your request for extension, resubmission or modification of assessment. Only authorised departmental officers will have access to this information and your personal details will not be given to any other third party without your written consent, unless authorised or required by law.

Student Name:	
Student No.:	
Contact Details:	
Employer (trainee or apprentice only):	
School (school-based applicant only) School Contact:	
Unit of Competency:	
Assessment Item/s:	

Student Request

- Time extension: I wish to apply for an extension of ____ days (or until ____/____/____) *(If this time extension means your Close of Study date needs to be amended, you must apply 21 days prior to your current Close of Study date. If unsure of your Close of Study date, please consult your teacher.)*
Reason for time extension (attach doctor's certificate or other relevant documentation)
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- Assessment instrument modification
Reason for modification request:
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- Other as described below:
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Student's signature: _____ **Date:** ____/____/____

Students: **Prior** to the assessment/assignment due date (for time extension see above) complete, sign and date this form and then submit it to your teacher for consideration/approval. If approval is granted attach the approved form to your assessment/assignment.

Consideration / Modification		Conditions
<input type="checkbox"/> Granted <input type="checkbox"/> Not granted <input type="checkbox"/> Granted with conditions (Please check IP07)		
Teacher's Name: _____		
Signature of Teacher: _____	Date: ____/____/____	
_____	Date: ____/____/____	
Signature of Education Business Manager		