



RIVERVIEW LEADERSHIP COLLEGE

## Assignment Extension Request

Student Name:.....

Subject: .....

Lecturer's Name: .....

Title / Number of Assignment: .....

Due Date: .....

Requested New Due Date:.....

### REASON FOR EXTENSION REQUEST:

.....

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.....Signed:.....

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### RESPONSE

Extension Granted

New Due Date: \_\_\_\_\_

Extension Refused

Penalty to be applied: \_\_\_\_\_

### Academic Dean's Comments:

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.....

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.....Signed:  
.....

If extension is granted, attach this form to your assignment so as not to incur late penalties.