

# REQUEST FOR AN EXTENSION

Date \_\_\_\_\_

Class # \_\_\_\_\_ Name \_\_\_\_\_

Instructor \_\_\_\_\_

Student Name \_\_\_\_\_

I would like to request an extension because \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Length of extension \_\_\_\_\_

Work will be turned into the Adler Student Services Office on \_\_\_\_\_  
date

Student's Signature \_\_\_\_\_

Instructor's Approval \_\_\_\_\_

***Please return the signed form to the Student Services Office, Room # 311***