

COURSE EXTENSION FORM

Student Name:.....

Student ID: Date of Birth:

Address:

Contact No.....Email:

Course Code and Name -.....

Reason for extension:

Note:-Course extensions will be considered on a student-by-student basis and fees will be applied. (see fee schedule below).

The available extension options are listed below:

- 1-month extension • 3 months' extension • 6 months' extension

To apply for a course extension, the student will be required to complete the Extension Form and return this to admin@accend.edu.au

Please note: an extension request can be denied by Accend Education Group if the course allocation becomes full.

Student Signature:

Date:

| | | |
|---------------------------------------|-------|------------------------|
| Course Extension Fee structure | \$150 | 1 Month extension |
| | \$250 | 3 Month extension |
| | \$400 | 6 Month extension |
| | \$850 | Re- completion of unit |

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|--|-------|
| For Office use only- | |
| Request received by- | Date- |
| Assessor/Trainer Approval- | Date- |
| CEO Approval- | Date- |
| Decision on request- (Extension- Granted/ not Granted) | |