Hibernia College Quality Framework

## Extension Request Form

Read this form carefully, then complete sections 1 and 2 and submit it by email along with any supporting evidence to **StudentAdmin@hiberniacollege.net**

# Student Information and Declarations (completed by the student)

## Student Details

|  |  |
| --- | --- |
| **Name**  |  |
| **Student Number** |  |
| **Programme**  |  |
| **Programme Cohort** |  |

## Checklist and Declaration

*Note: Do not submit this application until you have completed this checklist and signed below.*

|  |  |
| --- | --- |
| **Statement** | **Tick** |
| I have read and understood the **Extension Policy** and **Procedure for Applying for an Extension to Coursework** before completing Section 2 below.[These are available on HiberniaCollege.com.  |  |
| I have completed this form to the best of my knowledge and included all relevant information. |  |
| I understand that extensions should not be assumed to be granted, and until I am notified of the outcome of my extension request I will continue to work to the best of my ability to the original deadline. |  |
| I understand that it is my responsibility to demonstrate that extenuating circumstances have affected my performance in this assessment. |  |
| Signed |  |
| Dated |  |

# Circumstances (completed by the student)

## Assessment

|  |
| --- |
| **Identify the assessment and deadline you wish to extend.** |
|  |

## Circumstances

|  |
| --- |
| **Describe the circumstances and how they affected your ability to complete in time the above assessment** |
|  |
| **When did the circumstances arise? Please give specific dates.** |
|  |

## Evidence

|  |
| --- |
| **Where requested, please provide original and verifiable evidence in support of your application for Extension to Coursework.**  |
|   |

# Determinations (completed by the College)

## Verification Checklist

|  |  |
| --- | --- |
| **Question** | **Tick** |
| Student declaration complete? |  |
| Evidence Requested? |  |
| Extension Granted? |  |
| New Submission Date |  |

# Completed by:

|  |  |
| --- | --- |
| Name/Signature |  |
| Date |  |