



ASSESSMENT EXTENSION APPLICATION FORM

If you require an assessment extension on the due date of your critical assessment tasks (CAT) or Cluster assessments, you are required to complete all parts of this form and email it to the assessmentcentre@skilledup.edu.au

Please fill in all details accurately and clearly.

PERSONAL INFORMATION

Full Name: _____

Student ID: _____ Application Date: ____/____/____

Home Phone: _____ Work: _____ Mobile: _____

Email Address: _____

Postal Address: _____

COURSE INFORMATION

Course Title

Course Code: _____ Trainer/Assessor Name: _____

Existing Due Date: _____ New Proposed Date for Submission: _____

Assessment/Cluster Detail: _____

DECLARATION

☐ I commit to have all my completed critical assessment tasks (CATs) submitted to the Skilled Up via email or hard copy to assessmentcentre@skilledup.edu.au by the new date I have nominated above.

Applicant Name: _____ Signed: _____ Date: _____

Office Use Only:

Approved by (Director Academics/Delegate): _____		Signed _____	
Date: _____	Student on Intervention: ☐ Yes ☐ No	Student Attendance: _____	%