



Graduate Studies

Application for Extension to Complete Coursework

Any personal information collected on this form is protected under the Freedom of Information and Protection of Privacy Act. The information you provide will be used to update your OCAD U records. These records are only viewed by OCAD U administrative staff and are not released to any other parties.

As per the Graduate Studies Policy #6005, students who find themselves unable to meet the deadlines for the completion of course work may apply for an extension. The authority to grant an extension rests with the student's Graduate Program Director, after approval has been granted by the instructor of the course. Refer to Graduate Studies Policy #6005, for information on deadlines, grounds, and time limits.

To be completed by the student	
Last Name:	First Name:
Student ID Number:	Email Address:
Course Code and Title:	
Instructor:	
Please outline the reason(s) you are requesting an extension. You may attach additional pages to this form if necessary. See Graduate Studies Policy #6005 for more information on Grounds for Extensions. You may be required to submit documentation to support your request, such as a letter from a physician in the case of an illness.	
Student Signature:	Date:
Instructor Signature:	Date:
Time Limit for Extension (due date for course work):	

To be completed by the Graduate Program Director	
Request for extension:	<div style="display: flex; justify-content: space-around;"> Approved Not Approved </div>
Comments:	
Signature:	Date:

Copies of this form must be provided to the course instructor and to the Office of Graduate Studies.