

Extension of Assignment Request Form

Student Name: _____ Term: _____ 20_____

Coyote ID: _____ CSUSB Email: _____@coyote.csusb.edu

Phone: _____ Check One: Home Work Cell

Information for the Student:

1. I must request an extension before the assignment due date. The earlier the better.
2. I understand that this form is made to be a conversation between student and faculty, where my extensions also take into account the unique nature of the class and its activities.
3. I don't have an extension until this form is signed and completed by each party. It is my responsibility to complete my work by the agreed upon extended deadline.
4. My extensions are only for the assignments listed below. If I have additional requests, I'll need to submit an additional form

I have read and agree to the above responsibilities and statements.

Student Signature: _____ Date: _____

Course Number & Section: _____ Course Registration No: _____

Days/Time: _____ Location: _____ Instructor: _____

Office Location: _____ Department Location: _____ Office Hours: _____

Instructor Email: _____@csusb.edu

Information for the Instructor:

I verify that the original and alternate due dates below are correct and complete.

If I have any questions or concerns, I'll promptly reach out to SSD@csusb.edu to discuss the nature of my course

New Due Dates:

1. _____
2. _____
3. _____
4. _____

Old Due Dates AND Name of Assignment:

1. _____
2. _____
3. _____
4. _____

Instructor Signature: _____ Date: _____