

REQUEST FOR COURSEWORK EXTENSION

First extension: May be granted by the college AD Director.

Subsequent extension: Requires the approval of both the college AD Director and the TST AD Director.

The Instructor and College AD Director must specify an extension period, which is not to run beyond the TST deadline for completion of coursework and grade submission following the original college deadline for the course. The TST deadlines for course extensions are as follows:

April 25, 2014 Fall session (Y, H) courses

Sept. 5, 2014 Fall/Spring session (Y) and Spring session (Y, H) courses

Jan. 9, 2015 Summer session courses and extended courses

Last Name:	First Name:		Student Number				
College	<u> </u>		U of T email				
□ EN	/ □ KN □ RG □ SM	☐ TR ☐ WY					
Department			Degree				
Biblical	Historical Pastoral	☐ Theological	☐ MA ☐ ThM ☐ PhD ☐ ThD				
Have you had a previou	s first extension to complete coursewo	ork?					
	Yes No, this is a first extension						
If no, provide a reason f	or the request:						
Medical or disability related circumstances, which have delayed the completion of assignments, shall be accompanied by a health or disability related certificate from an appropriate professional. For other circumstances, provide a statement of the reasons for the delay. An additional sheet may be used.							
If yes, provide the date on which the extension expires:							
Castian 4 Tale	a commission of breath a CTUE	NENT					
	<u> </u>	-	r extension to complete coursework:				
Course Code	Course Name	Se	ession (F, W or S) Instructor				
Work remaining to be	completed:		I				
Tronk remaining to be	. compressed						
a. Suggested deadline for coursework:							
List other courses for which you have an extension (if applicable) in the current academic year.							
Course Code	Course Name	Se	ession (F, W or S) Instructor				
List other courses for which you are <i>applying for</i> an extension (if applicable) in the current academic year.							
Course Code	Course Name	Se	ession (F, W or S) Instructor				
Student's Signature			Date				
Stadent's Signature			Date				



REQUEST FOR COURSEWORK EXTENSION

Section 2 – To be Completed by the INSTRUCTOR.

Section 2 – To be completed by the instruction	11.					
Instructor's Name:						
Do you support the student's request to complete coursework (se	on soction 1a\2	Yes	□No			
If not, indicate rational to deny the request or an earlier deadline						
in not, maleute rational to delity the request of an earlier deadline	TOT THE EXTENSION O	o complete co	arsework.			
Provide rationale, if recommending a non-standard extension to	complete coursewo	ork (see section	1-4 below):			
Instructor's Signature:			Date:			
Section 3 – To be Completed by the COLLEGE ADVANCED DEGREE DIRECTOR.						
Section 3 To be completed by the college Ab	VAILED DEG	INCE DINCE	on.			
See section 7.9 in the MA and ThM handbooks or section 7.11 in	the ThD/PhD handb	ook. Legitimat	te reasons for an extension can be			
academic in nature (e.g., unexpected problems of research in a co						
uniformity and fairness as possible in the granting of extensions (or continuations of	extensions), the	he relevant college AD Director must be			
reasonably certain that:						
1. the reasons for the delay are both serious and su		ident must pro	ovide a statement detailing the reasons,			
together with a physician's letter in the case of illness;						
2. the student would not be granted an unfair acade						
3. the student would not be placing in jeopardy the4. the student does have a reasonable chance of co						
4. the student does have a reasonable chance of co	impleting outstand	ing requiremen	its within the time to be anotted.			
College A.D. Director's Name:						
Request for coursework extension: Approved Denied						
Provide rationale, if recommending a non-standard extension to complete coursework:						
College A.D. Director's Signature:			Data			
College A.D. Director's Signature.	Date:					
**College Registrar, indicate SDF was added on ROSI for first exte	Date:					
Yes						
Section 4 – To be Completed by the TST ADVANC	CED DEGREE D	IRECTOR (i	f required).			
Doguest for subsequent course well-sub-using.	Approved	Denied				
Request for subsequent coursework extension: TST A.D. Director's Signature:	Date:					
131 A.D. Director 3 Signature.	Date.					

Distribution of form: copy to Student, Registrar and Instructor

Privacy Policy: Personal information is collected for the purpose of admission, registration, academic programs, university-related student activities, activities of student societies, safety, financial assistance and awards, graduation and university advancement, and reporting to government.

At all times it will be protected in accordance with the Freedom of Information and Protection of Privacy Act.

If you have questions please contact the TST Registrar, Toronto School of Theology, 47 Queen's Park Crescent East, Toronto, ON M5S 2C3 or call 416-978-4040.