



**First extension:** May be granted by the College Graduate Director.

**Subsequent extension:** Requires the approval of both the College Graduate Director or the DMin Director.

**Extraordinary extension:** Requires the approval of both the DMin Director and the GCTS Director.

The Instructor and College Graduate 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 can be found on the TST website at <https://www.tst.edu/academic/key-academic-dates>. The deadline for requesting an initial extension is the published deadline for grade submission for courses offered in the relevant session.

For **first** and **subsequent** extensions, section 1 of this form must be completed by the DMin student using the fillable PDF function. Once sections 1-3 are complete, scan and send the signed form to the DMin Office.

## STUDENT INFORMATION (to be completed by the student)

Last Name:		First Name:		Student Number:	
College: <input type="checkbox"/> EM <input type="checkbox"/> KN <input type="checkbox"/> RG <input type="checkbox"/> SM <input type="checkbox"/> TR <input type="checkbox"/> WY				UofT email:	
This is a request for:					
<input type="checkbox"/> a <b>FIRST</b> Extension (for one semester)					
<input type="checkbox"/> an Extension <b>past the Published TST due date</b> . Please state date on which the current extension expires: _____					
<input type="checkbox"/> an <b>EXTRAORDINARY</b> Extension. Please state date on which the current extension expires: _____					
Reason for the request: <i>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.</i>					

## Section 1: Request for Extension to Complete Coursework (to be completed by the student)

Course Code	Course Name	Session	Instructor
Work remaining to be completed:			
Suggested deadline for coursework:			
<b>List other courses for which you currently have an extension (if applicable).</b>			
Course Code	Course Name	Session	Instructor
<b>List other courses for which you are applying for an extension (if applicable).</b>			
Course Code	Course Title	Session	Instructor
Student's Signature:			Date:

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.

Your Personal Information will be protected at all times.

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.



# REQUEST FOR COURSEWORK EXTENSION

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## Section 2: To be Completed by the INSTRUCTOR

Instructor's Name:	
Do you support the student's request to complete coursework (see section 1a)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If not, indicate rationale to deny the request or an earlier deadline for the extension to complete coursework:	
Provide rationale, if recommending a non-standard extension to complete coursework (see section 3 below):	
Instructor's Signature:	Date:

## Section 3: Approval (to be completed by the COLLEGE GRADUATE DIRECTOR)

See §A7.11.2 in the DMin Handbook. Legitimate reasons for an extension can be academic in nature (e.g., unexpected problems of research in a course) or non-academic (e.g., illness). In order to ensure as much uniformity and fairness as possible in the granting of extensions (or continuations of extensions), the College Graduate Director or DMin Director (subsequent extension) must be reasonably certain that:

- the reasons for the delay are both serious and substantiated: the student must provide a statement detailing the reasons, together with a physician's letter in the case of illness;
- the student would not be granted an unfair academic advantage over fellow students in the course;
- the student would not be placing in jeopardy the normal and satisfactory completion of new coursework; and
- the student does have a reasonable chance of completing outstanding requirements within the time to be allotted.

For **first extensions**, complete sections 1-3 and forward to the college registrar. For **subsequent extensions**, complete sections 1-3 and forward to the DMin Office.

**First Extension:**

Please Indicate: <b>Approved / Declined</b>	College Graduate Director's Signature:	Date:
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## Section 4: Academic Record (to be completed by the College Registrar)

Was SDF added on ROSI for <b>first</b> extension to complete coursework? <input type="checkbox"/> Yes <input type="checkbox"/> No
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## Section 5: Approval (to be completed by the DMIN DIRECTOR)

**Subsequent Extension:**

Please Indicate: <b>Approved / Declined</b>	If approved please indicate new deadline to complete coursework: _____
Provide rationale, if recommending a non-standard extension to complete coursework:	
DMin Director's Signature:	Date:

## Section 6: Extraordinary Approval (to be completed by the GCTS DIRECTOR)

Please Indicate: <b>Approved / Declined</b>	GCTS Director's Signature:	Date:
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<i>Office Use:</i> Distribution of form <input type="checkbox"/> Student <input type="checkbox"/> Instructor <input type="checkbox"/> College Registrar <input type="checkbox"/> DMin Office (if subsequent extension) <input type="checkbox"/> GCTS Office (if extraordinary extension)
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