



Florida A&M University College of Law

EXTENSION REQUEST FORM

[Please complete and return to the College of Law Registrar's Office with appropriate signatures]

Student Name:		Student ID No.:	
Student contact No.:		Student FAMU e-mail:	
Semester:		Year:	
Course Name:		Professor Name:	

I, as a faculty member of the above course, grant for good cause, an extension of the due date (which is the last day of the current final exam period) an extension of no longer than six (6) weeks to satisfactorily complete the required coursework. **[Note: If an extension request is less than three (3) weeks, it is not necessary to complete this form].**

Any further extension beyond six (6) weeks may be granted only with the written permission of the Associate Dean of Academic Affairs along with the consent of the faculty member. Please refer to Extensions and Incomplete Grades policy in the Student Handbook for additional information.

Professor Signature:		Date:	
Student Signature:		Date:	

For Office Use:

Date received by College of Law Registrar's Office: _____