

Year  
 Summer  
 Fall  
 Spring

# Extension of Time Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Baylor ID:

## Extension Information:

Course & Section (including CRN) to be Extended: \_\_\_\_\_

New extension end date: \_\_\_\_\_

Reason for Extension:

For Internal Use Only	
<b>APPROVAL:</b>	_____ <b>Instructor</b>
	_____ <b>Department Chair</b>
	_____ <b>Dean</b>

For Office of the Registrar Use Only	
Received Date: _____	Completed By: <input style="width: 100%;" type="text"/>