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**FACULTY OF HUMANITIES
 PETITION FOR SPECIAL CONSIDERATION
 REQUEST FOR DEFERRED TERM-WORK**

Date: _____

Name: _____ Student #: _____

Program & Level: _____

Telephone #: (_____) _____ Email: _____@mcmaster.ca

1. I request deferred term-work privileges in the following course:

Course (e.g. English 1A03): _____ Instructor: _____

Instructor Email: _____@mcmaster.ca

2. I have not completed the following work in this course:

Work (e.g. essay 1, assignment 2)	Weight (%)

3. Reason for Request - Medical or other certification must be attached to this request.

I understand the following information:

- It is the responsibility of the student to confer with the instructor with regard to submission of the outstanding work.
- University guidelines stipulate the maximum extension that may be granted is 30 days for a 3-unit course and 50 days for a 6-unit course past the end of the term.
- If there are any discrepancies with the missed work reported, the request for incomplete term work may be denied.

 Student's signature (see note above)

_____ Approved by Reviewing Committee

_____ Not approved by Reviewing Committee

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