

Fee Extension Request Form

		<input type="checkbox"/>	<input type="checkbox"/>
		M	F
Family Name (Surname)	Given Name(s)	Sex	
Student ID	Mobile		
Email Address	Nationality / Citizenship		
Intake Number	Course		

I request an extension for payment of the following:

Invoice Number:

Amount:

Reason: (Please attach any supporting documentation)

Acknowledgement

I understand that my application for an extension on fee payment will be processed in accordance with NAIT Student Fees and Charges Policy.

Print Name:

Signature:

Authorisation for Processing						
Action to be taken:	Approved	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Adjusted Amount	<input type="checkbox"/>
Extension Date:						
Comments:						
Print Name:		Date Processed:				

Signed:

Position: