

HOMEWORK ASSIGNMENT EXTENSION REQUEST FORM

Name: _____ Date: _____

Phone Number: _____ Email address: _____

Class Level: _____ Class date: _____

Class location: _____

Instructor's name: _____

Reason For Extension Request:

Mail or email this request form, or an email with the information within this form, to:

Debbie Bailey
Operations Manager
Continuing Education

Mail:
Olds College
4500 -50 Street
Olds, AB T4H 1R6

Email
dbailey@oldscollege.ca

Please contact Olds College Continuing Education registration to pay the extension fee: 1-800-661-6537, ext 7956 or 4677.

EMAIL info@oldscollege.ca ONLINE www.oldscollege.ca

OLDS CAMPUS 4500 – 50 Street, Olds, Alberta, Canada, T4H1R6
PHONE Toll Free 1.800.661.6537 or 403.556.8281 FAX 403.556.4711

CALGARY CAMPUS 345 – 6 Avenue, SE, Calgary, Alberta, Canada, T2G4V1
PHONE 403.697.6130 FAX 403.697.6131

