



1 Irving Place #06-05, The Commerze@irving, Singapore 369546

www.IDanceStudioSG.com info@idancestudiosg.com

Studio (65) 6909 8233 What's App Msg (65) 9143 0755

EXTENSION REQUEST FORM

TO BE COMPLETED BY THE APPLICANT

Please note: you may use this form to request an extension for more than one assessment component.

Full name: _____ Membership number: _____

Contact number: _____ E-mail: _____

Request extension days: _____ days Submission date: _____

Please state your reason(s) for being unable to finish your package on time:

Supporting document(s) attached: Email / Hard copy

Sign: _____

Please note:

- Extension can only be granted where are **clear medical/personal circumstances** (supported by independent document) that have affected your ability to finish your package on time.
- If the extension is granted, it will be for a period to prior to supporting document(s).
- You should submit this form at least **five working days** prior to the expiry date of the package.
- If you are unable to present supporting document(s) with your form, IDance Yoga & Fitness Studio reserves the rights to reject your request.
- Decisions regarding requests will be reflected to the applicant by email or message.
- **Retrospective requests for extensions will not be considered.**



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EXTENSION REQUEST FORM

TO BE COMPLETED BY MANAGEMENT

Supporting document(s) attached? YES NO PENDING

Extension approved? YES NO

Received date: _____ Decision made by: _____

Comment: _____

Total extension dates: _____ New Expiry date: _____

Date of notification to applicant: _____