

Notification of Extension of Learning Agreement

This form should be completed and signed by the Access to HE Co-ordinator and countersigned by the Moderator for the Diploma. One application per learner should be made with any supporting evidence. These forms should be presented and agreed at the Final Awards Board. All forms should be returned to access@gatewayqualifications.org.uk with a copy retained by the centre.

Centre Name	
Diploma Title	
Name of learner	
Cohort Number	
New Finish Date	

Rationale for Extension:

--

List the units below to be extended and the completion date(s).

Unit Code	Unit Title	No. of Credits	Date to be completed

Please ensure that this application form is signed by all those identified below:

Provider Access to HE Coordinator

Name		Date	
Signature			

Access to HE Moderator

Name		Date	
Signature			