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TUITION PLAN EXTENSION REQUEST

Any student unable to meet the deadlines as laid out in their Student Contract, as per the Payment Addenda, may request for an extension or adjustment to terms with this form. Please provide as much information as possible as to your specific circumstances and individual needs so as to assist us in assessing and assisting you if possible.

FORM MUST BE SUBMITTED AND RECEIVED NO LATER THAN 7 DAYS PRIOR TO PAYMENT DUE DATE*.

Student Name: _____ Date submitted: _____

Tuition Plan: _____ Payment Due Date*: _____

Reason for Payment Extension Plan Request: _____

Proposed Plan for Revised Payment Schedule: _____

PLEASE PROVIDE ANY SUPPORTING DOCUMENTATION AND ATTACH TO APPLICATION FOR CONSIDERATION.

Student's Signature: _____ Date: _____

OFFICE USE ONLY:

Approved by: _____ Date: _____

Revised Tuition Plan Due Dates: _____

Finance Fees to be applied: _____