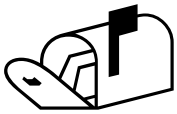
SAM HOUSTON STATE UNIVERSITY

A Member of The Texas University System

EXTENSION REQUEST



Mail completed form to:
Sam Houston State University
Correspondence Course Division
Box 2536
Huntsville, TX 77341-2536

FAX completed form to:
936.294.3703

Students have one year from the date of enrollment to complete a correspondence course. If you do not anticipate completing your course within that year, you may obtain one six-month extension. Only one six-month extension is allowed for a $25.00 fee. You must extend your course(s) **BEFORE** your expiration date. Official communication from our office is sent to you via e-mail. Periodically check it for information from our office.

Please print in ink or type:

Name (Last First, MI):	SHSU Student ID Number:
Address:	
City: State: ZIP:	
Phone:	E-mail:
Course Prefix and Number (Ex: FCS 369):	Course Prefix and Number (Ex: FCS 369):

Extension Fee: $25.00

Number of Courses: _____

Total Cost: $ _____

Affix "XT" bar code label(s) here

Method of Payment	
❑ Check ❑ Money Order	Make check/money order payable to: *Sam Houston State University*
❑ VISA ❑ MasterCard	Card Number: Exp. Date:

Office Use Only

Course Expiration Date:_____

Extension Granted: ❑ Yes ❑ No: ☐ Extension not needed at this time. ☐ Must pay a re-enrollment fee.

December 2006