

Initial and sign below:

___ I understand that if my request does not include all required documents, it will be denied and returned.

___ I understand that I am responsible for making sure all my request documents have been submitted.

___ I understand that requests cannot be approved after the *Deadline to submit request*.

___ I understand that this request is for an extension only and not a guarantee of flight lab completion.

___ I understand that if my request is approved, I am responsible for meeting the new extended deadline.

___ I certify that the information I have provided in this request is true and complete.

___ I understand that if I do not meet the initial or extended 19 Week Deadline it is my responsibility to consult with the Office of Military & Veteran Affairs regarding any monies owed to the VA.

Student Signature

Date

Submit completed form and all additional documentation to:

Kennedy Irakoze
Aviation Student Training Manager
Phone: (859) 622-2835
Email: kennedy.irakoze@eku.edu

Office Use Only:

Approved/Denied: _____

Adjusted 19 Weekend Extension Deadline: _____

Dennis Sinnett, Director of Aviation

Date