

RESPONSIBLE EXECUTIVE (RE) EXAM EXTENSION FORM

Upon payment please treat this form as a tax invoice – Kaplan Education Pty Ltd. ABN 54 089 002 371

Upon enrolment, 2 deadlines are created.

1. **First exams** must be attempted **within 1 month** of your enrolment date.
2. **Resit exams** (if necessary) must be attempted **within 3 months** of your enrolment date.

If you are unable to meet a particular deadline, you can request an extension which will extend this and any future deadline by an additional two months. You must lodge your request for an extension before the applicable deadline, otherwise course re-enrolment will be required. A limit of one extension per course per person applies.

Personal Details

Mr / Mrs / Ms / Miss (Please circle)

First Name _____ Last Name _____

Job Title _____ Organisation _____

Address _____

Suburb _____ State _____ Postcode _____

Tel (h) _____ (w) _____ (m) _____ Fax _____

Email _____

Payment Details

I am paying **\$150.00*** for a 2 month extension (*GST Free).

Payment Details

Invoice Company Only available to approved companies. Invoices will be sent to the address specified on your debtor card.

Name: _____ Phone Number: _____ Debtor ID: _____

Email Address: _____ Signature*: _____

*To authorise this invoice request you must be an existing contact on your company debtor card with Kaplan Professional. In the absence of an authorised signature an email will be sent for approval of enrolment.

Cheque (Please make cheque payable to Kaplan Education Pty Ltd) Cheque No. _____

Mastercard **Visa**

Card Number _____ Expiry Date ____ / ____ Total \$ _____

Cardholder's Name _____ Cardholder's Signature _____

EMAIL TO exambookings@kaplan.edu.au

MAIL TO GPO Box 9995, Sydney NSW 2001

FAX TO 1300 137 802