

Application for Academic Term Extension

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

To,

[Recipient's Name]

[Department Name]

[University Name]

[University Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request an extension of my academic term due to health issues that have significantly impacted my ability to complete my coursework.

During the past few months, I have been dealing with [briefly explain health issue, e.g., a medical condition or treatment], which has hindered my studies and overall academic performance. I have attached medical documentation to support my request.

Considering these circumstances, I kindly ask for an extension of my current term until [proposed extension date]. This additional time will allow me to recuperate and complete my studies successfully.

Thank you for considering my application. I look forward to your understanding and support regarding my situation. Please feel free to contact me if you require any further information.

Sincerely,

[Your Name]

[Student ID Number]