

Application for Extension

ABOUT THIS FORM

When to use this form & important information

Use this form to apply for a reporting extension of more than one month.

Please note, extensions of more than one month are not automatically approved. We will review this form and respond to you with an extension application decision.

Important information:

- An application for extension must be submitted within the reporting lodgement period of **1 April to 31 May** (private sector reporting).
- Once an extension has been approved, you cannot apply for another extension.
- If your extension is approved, you must lodge your fully compliant Report within the approved extension period to be eligible to receive a Certificate of Compliance.
- If your extension is not approved, you must lodge your Report by 31 May to be eligible to receive a Certificate of Compliance.
- For information about your compliance requirements, please visit [Reporting compliance](#).
- For more information about extensions, please visit [Reporting extensions](#).

WGEA Privacy Notice

The Workplace Gender Equality Agency (WGEA) collects the information contained in this form to assess this reporting extension application only.

WGEA's Privacy Policy contains further information about:

- our information handling practices
- how an individual can request access to, or correction of, their personal information held by WGEA
- how to make a privacy complaint.

WGEA's Privacy Policy and data and information management protocols are available at [Privacy Policy](#). For further information, please contact the Privacy Officer:

Workplace Gender Equality Agency
GPO Box 4917, Sydney, NSW 2001
wgea-privacy@wgea.gov.au

Completing & submitting this form

Who can apply for an extension:

- CEO or equivalent, or
- Reporting contact.

Submitting this form:

- Ensure all mandatory questions marked with an asterisk (*) are answered.
- Send the completed form to support@wgea.gov.au
- Allow 10 business days for processing.

EMPLOYER DETAILS

IMPORTANT: For this form to be accepted, all questions marked with an asterisk (*) are mandatory.

Employer (legal name): *

Employer identifier (ABN, ACN): *

Applicant (first and surname): *

Position/role: *

Phone: *

Email: *

EXTENSION REQUEST DETAILS

Requested extension period: *

☐ **2 months** (Report due 31 July)

☐ **3 months** (Report due 31 August - exceptional circumstances only)

Extension reason: *

Provide a detailed explanation about why you require an extension for more than one month.