



STATE OF MAINE  
DEPARTMENT OF EDUCATION  
23 STATE HOUSE STATION  
AUGUSTA, ME 04333-0023

JANET T. MILLS  
GOVERNOR

PENDER MAKIN  
COMMISSIONER

**Audit Extension Request**

Name of School Administrative Unit: \_\_\_\_\_

Fiscal Year(s): \_\_\_\_\_

**Please indicate the late document below:**

(check one box)

☐ Financial Statement Audit

☐ Single Audit

☐ Corrective Action Plan

**Please indicated the entity or entities the request(s) is intended**

(may check more than one box if applicable)

☐ School Department Audit

☐ Municipal Audit

☐ Combined Audit (school & municipal audit as one document)

**Request for opportunity for a hearing OR to submit written testimony in lieu of a hearing (choose one):**

☐ In lieu of a hearing pursuant to [20-A MRSA §6801-A\(1\)](#), I have answered the questions below\*.

☐ I request a hearing pursuant to [20-A MRSA §6801-A\(1\)](#).

**\*The following questions must be answered in lieu of a hearing (please attach additional pages if needed)**

1. Please Explain the reason why the required document(s) are late?

\_\_\_\_\_

2. Please indicate audit firm performing the audit \_\_\_\_\_

3. What actions will be taken to ensure reporting deadlines will be met in the future?

\_\_\_\_\_

4. When will the Department receive the required document(s)?

\_\_\_\_\_ Date

\_\_\_\_\_  
Signature – Superintendent of Schools

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name – Superintendent of Schools

**email to:**

[DOE.Audit@Maine.gov](mailto:DOE.Audit@Maine.gov)

**Contact:**

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