

INCOMPLETE GRADE ASSIGNMENT

INSTRUCTIONS

INSTRUCTOR

Complete this form and obtain the student's signature or attach a written request from the student requesting the grade of Incomplete. Keep a copy for your files, give a second copy to the student, and forward the original to your department/school chair/director. For all courses a Change of Grade form must be submitted to your department/school in time for the grade to be converted by the last day of classes of the next semester (this is the last day of the Fall semester for Incompletes in Spring courses). If a Change of Grade form is not submitted by the deadline, the grade of "I" will be converted to a failing grade.

Should you approve of an extension of the time limit, complete the bottom of this form and resubmit it to the dean's office for final approval before the expiration of the appropriate deadline mentioned above. Be sure to enter the exact date of the extended deadline and sign the form.

STUDENTS TAKING UNDERGRADUATE OR GRADUATE LEVEL COURSES

You must finish all work necessary to complete this course in time to allow your instructor to evaluate your work and submit a grade to the department no later than the last day of classes of the next semester. Incompletes awarded in the Spring must be converted by the last day of classes in the Fall semester.

Should you desire an extension of the time limit you must contact your instructor before the expiration of the deadline (last day of classes). If your instructor does not report a grade for you or submit an extension request by the deadline, the grade of "I" will be converted to a failing grade.

DEPARTMENT/SCHOOL

After the chair/director signs, forward a copy to the dean's office. File the remaining copy for future reference. The Office of the University Registrar does not keep a copy of this form.

Name _____			<input type="text"/>												
Last			First			MI		Student ID Number							
Semester _____	Year _____	<input type="text"/>			<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>		<input type="text"/>		
		Call No.			Subject		Course		Section		Credits				

Reason For Incomplete Grade: _____

Course work remaining to be completed and specific deadline dates for completion: _____

_____ Student's Signature	_____ Date
_____ Instructor's Signature	_____ Date
_____ Department Chair/Director	_____ Date

EXTENSION DATE	
_____ Instructor's Signature	_____ Date
_____ Dean's Signature	_____ Date

