

Incomplete Grade Request Form (IF)

Student Requesting IF Grade (Last, First Name):

Student ID Number: Semester: Term:

Course Subject & Number: Course Title:

Section Number: Instructor:

Reason for request (Documentation required): Is 75% of the course completed: YES NO

Assignment (s) to be completed: Date Due (MM/DD/YYYY):

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This document serves as a contract between the student and the instructor regarding the approval of an incomplete grade. A grade of "IF" denotes that the required work for the course is incomplete due to unforeseen circumstances and is awarded at the discretion of the instructor. Unforeseen circumstances mean, for example, that an accident, an illness, a death, or a major life transition has occurred.

Incompletes are granted at the discretion of the faculty. A student must submit a proper request using this form to the instructor explaining the unforeseen circumstances warranting an incomplete. The student also must have completed 75% of the course work with a passing grade in order to be eligible for an incomplete. The length of time and the remaining requirements to complete the course are determined by the instructor; however, the maximum length of time for completion is the end of the following term.

If course work is not completed by the end of the next eight-week term and a grade change form is not submitted by the instructor, the incomplete grade reverts to an "F" and is calculated in the grade point average. It is up to the student to complete the work, send the work to faculty, and keep track of the final due dates. Due to rare circumstances, a student may request, in writing, that an extension be granted. The extension must be approved by the Associate Dean or his/her designee for the respective program. Note: Faculty mark the grade sheet with an IF.

Note that the only grade possible for an incomplete is "IF".

I understand that if the incomplete grade is approved, it is my responsibility to submit the required work by the due date(s) listed above.

Student Signature: _____ Date: _____

IF Grade Approved: Yes No

Faculty Signature: _____ Date: _____