



Request for Grade of Incomplete

**Must be received by the appropriate Assistant/Associate Dean no later than
the last day to submit grades for the semester/term**

Student Name: _____ Student ID: _____

Student Email: _____ Student Phone #: _____

Student Standing (please circle): Undergraduate Graduate

Degree Student is Earning: _____

Academic Area/Major: _____

Course Number & Title: _____

Semester Course was Taken (please circle): Fall Spring Summer Year: _____

Instructor Name: _____

Part A. To be completed by the instructor:

Please initial to verify the following criteria for an Incomplete grade:

1. _____ The student has specifically requested an Incomplete grade.
2. _____ The student has provided documentation to verify a specific situation beyond his/her control that makes completing coursework on time impossible (*please describe situation and documentation*).
3. _____ The student was passing the course when the emergency situation arose.
4. _____ The amount of coursework remaining is such that completing it beyond semester's end is reasonable and academically sound.
5. _____ The instructor and student have completed Part B specifying work remaining and the schedule for submitting it.

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Part B. To be completed by the instructor and student in consultation.

1. We agree that all remaining work for this course is to be submitted to the teacher

by the following date_____.

(The date must be no later than one week prior to midterm of the following semester—or, for Summer term incompletes, one week prior to the end of classes in the following Fall semester. Instructor may specify earlier submission. For undergraduates, this date is normally the FIRST day of the following semester.)

2. The remaining work for the course includes:

3. Indicate here any special instructions for submitting the work or scheduling exam.

4. The student acknowledges that failure to submit/complete all required work by the date specified in B1 above will result in a failing grade for the course. The student further acknowledges that it is his/her responsibility to make sure the instructor receives all the work on time, and to verify its receipt. The instructor is not responsible for reminding the student of these criteria and deadlines. The student and the instructor acknowledge that extensions of incomplete grades require prior approval by the school Dean and are rarely given.

Sign below to indicate your acceptance of these requirements. Each person keeps a copy of the form for their records.

Student's Signature

Date

Instructor's Signature

Date

Assistant/Associate Dean, STRS

Date

Student initiates the request and, if eligible, meets with the professor to complete. Approval is granted by either the Assistant Dean for Undergraduate Studies, Associate Dean for Graduate Ministerial Studies or Associate Dean for Graduate Studies as appropriate. **The form must be received by the appropriate Assistant/Associate Dean prior to the last day to submit grades for the term.**