

INCOMPLETE GRADE REQUEST FORM

This form must be signed by the course instructor, and be submitted to the Registrar's Office by the grade submission date as listed on the academic calendar for each semester.

Student's Name_____

Course Number _____Course Title_____

Semester and Year Course Taken_____

All outstanding coursework will be completed and submitted to the course instructor by:______ (This date cannot be more than **8 weeks** after the last day of the term. Please see academic calendar for exact dates.)

If the coursework is not submitted by the speci-	fied date, a grade of will be
posted to the transcript.	(Instructor Fills In Earned Grade)

Student Signature	Date
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Faculty Signature_____ Date_____

Please note:

Students with two or more Incompletes will not be allowed to register for the next semester.