

REQUEST FOR INCOMPLETE GRADE

ALL STUDENTS AND FACULTY:

An incomplete grade is a temporary deferral of a final grade pending the make-up of a small amount of coursework. Incomplete grades may be requested only under extraordinary circumstances when coursework completion is unavoidably and justifiably delayed. Students can only request an Incomplete when 80 percent of their coursework has already been satisfied. Faculty can refuse requests for incomplete grades if the reasons provided are deemed insufficient. Instructors must hand in Request for Incomplete Grade forms to the Office of the Registrar when final grades are submitted. Incomplete grades are not calculated into students' GPAs until replaced by a letter grade. Generally, the deadline to resolve an Incomplete is 30 days after the last class meeting, however, the faculty may, on a case by case basis, set a shorter deadline or grant an extension by indicating on this form or notifying the Office of the Registrar in writing. Please see the Student Handbook for program-specific details on deadlines and coursework submission requirements.

TO BE COMPLETED IN FULL BY THE STUDENT*:

* May be completed by faculty if they wish to grant an extension and the student is unavailable or incapacitated. Faculty should maintain a record communicating details of remaining requirements and coursework submission deadline to the student.

Student Information

First Name _____ Last Name _____
Student ID#: _____ - _____ Program: Associates Bachelors Masters Continuing Education

Address

LOCAL _____ City _____ State: _____ Zip _____
Day Phone: _____ Eve Phone: _____ Email _____

Course Information

Year: _____ Semester (check one): Fall Spring Summer
Course Code _____ Section _____ Title _____
Faculty Name(s) _____

Student is requesting an Incomplete for the following reason(s):

TO BE COMPLETED IN FULL BY THE FACULTY:

Current grade based on work completed: _____
Deadline for removal of incomplete: ____/____/____ (mm/dd/yyyy)

Course requirements remaining;

Required Signatures

By signing below you are indicating that you have read and agree to the guidelines defined at the top of this form and in the Corcoran Student Handbook.

Student Signature _____ Date ____/____/____
Faculty Signature _____ Date ____/____/____

Special Permissions/Office Use Only:

