

OFFICE USE ONLY		
Date Recorded:		
Recorder Initials:		

## GRADUATE & PROFESSIONAL STUDIES INCOMPLETE GRADE REQUEST

Student Name:	lent Name: Student ID:			
Academic Year:	Semester:			
COURSE INFORMATION				
Course Code:	_ Section: Title	:		
RATIONALE FOR REQUESTING INCOMPLETE GRADE				
Incomplete grades are approved only for circumstances beyond the student's control. A valid rationale is				
mandatory prior to review of the incomplete request form. For example:				
<ul> <li>Valid <u>academic</u> reasons might include unanticipated difficulty obtaining research materials, or failure of a critical experiment.</li> </ul>				
<ul> <li>Valid <u>non-academic</u> reasons might include extended illness, or death of a loved one, etc.</li> </ul>				
Invalid reasons include student elected not to complete the course on time, or student would				
otherwise fail the course, etc.				
Explanation for Incomplete Grade:				
	VCKNOWI E	DGEMENT		
ACKNOWLEDGEMENT  NOTE: Incomplete Grade Request Forms must be received by instructor by the final exam date, or other				
ending date of the course, whichever comes first. Courses not completed by the specified deadline will				
receive a grade of "F" in accordance with University policy.				
_	ident Signature: Date:			
INSTRUCTOR & DIRECTOR SECTION				
Deadline for Course Completion:				
Deadline may not exceed one semester beyond the scheduled end-date of the course. Faculty may designate				
an earlier deadline, but not later.				
Work to be Completed:				
Instructor Signature:		Date:		
	gress Specialist Signatu			