INCOMPLETE REQUEST FORM
Incomplete Form must be filed before the last day of classes. ALL signatures are required.

Student ID        Last Name        First Name        Date

I hereby request my Instructor to permit me to take an “INCOMPLETE” grade in:

Dept.              Course ID        Title

Instructor’s Signature        Student’s Signature        Department Chair’s Signature

To be completed with Instructor:
Work to be completed

Work must be completed by:    (check one)    MAY 1☐ for a Fall Course
Or, earlier if required by instructor: ____________________________
Instructor’s Date

If grade is not submitted by the term deadline for grades, the grade of “UF” will be recorded on the transcript.

DATE        FINAL GRADE        INSTRUCTOR’S SIGNATURE

For Instructor Use Only

This form must be submitted to the Registrar’s Office prior to the end of the current semester.
Distribution: Registrar-White/Instructor-Yellow/Student -Pink

Revised 5/2010