



# Incomplete Grade Request

## 453.05

**Instructions:** This form is to be used by undergraduate or graduate students who wish to request an incomplete grade. An incomplete grade may be assigned only when a student is currently passing a course and in situations involving extended illness, serious injury, death in the family, or employment or government reassignment, not student neglect. All course work must be completed within 60 calendar days of the term or semester in which the incomplete grade was given or the incomplete grade will automatically be changed to a failing grade. Return complete form with all signatures to the Registrar's office.

Please Print Clearly

Full Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Program Director: \_\_\_\_\_ Degree: \_\_\_\_\_

Semester: \_\_\_\_\_

Course ID	Section	Course Title	Professor's Signature	Date Signed	Current Grade
Ex. SCI 101	Ex. A	Ex. Biology I	Ex. Professor's Signature	Ex. 10/10/2010	Ex. B

Explanation: \_\_\_\_\_

\_\_\_\_\_

**Required Signatures (must be signed in the following order):**

Student: \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Office of Academic Affairs: \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Registrar: \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

Entered by: \_\_\_\_\_ Date: \_\_\_\_\_