



INCOMPLETE GRADE CONTRACT

TO THE STUDENT: This form constitutes your petition to receive a grade of "I" (incomplete) for the course listed below. For a grade of "I" (Incomplete) to be assigned this form must be completed in full, signed by both parties and the program director. A copy of the form will be maintained by the faculty member, student, and program director.

STUDENT NAME: _____ STUDENT ID: _____

FACULTY NAME: _____ SEMESTER: _____

COURSE TITLE: _____ COURSE #: _____

Student:

I understand and accept the conditions stated below. I acknowledge that it is my responsibility to complete the coursework in the time allotted, not to exceed one academic year. I also acknowledge that the grade of "I" is intended to be a *temporary* grade and should I fail to complete all coursework prior to the deadline stated below, **or within 1-year of receiving the incomplete**, I will receive a final grade of "F".

Faculty:

I accept as valid this student's petition for a grade of "I" (Incomplete) in the course listed above. For the course to be completed, AND FOR THE GRADE TO BE CHANGED FROM AN "I" (Incomplete), the following coursework must be finished and submitted by the stated deadline(s).

Coursework to be completed and due date(s)*:

Assignment Title _____	Type (Exam, Quiz, Paper, etc.) _____	Due Date _____
Assignment Title _____	Type (Exam, Quiz, Paper, etc.) _____	Due Date _____
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Assignment Title _____	Type (Exam, Quiz, Paper, etc.) _____	Due Date _____

**Faculty may attach a syllabus in place of the coursework to be completed and due dates.*

All course requirements must be completed by _____. Failure to complete the course requirements by the date listed above will result in a grade change by the instructor from an "I" to an "F." All work will be evaluated to standards already established for the course. (A grade of "F" will automatically be entered by the Registrar's office if the course is not completed within one academic year.)

Approval Signatures:

_____ Student Name	_____ Student Signature	_____ Date
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_____ Faculty Name	_____ Faculty Signature	_____ Date
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_____ Program Director Name	_____ Program Director Signature	_____ Date
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