

INCOMPLETE RECORD FORM

To be completed by Instructor assigning grade of Incomplete

Student _____
Last First Middle

College _____ Year _____

Course _____
Department Course No. and Title

Reason for Incomplete: _____

Date by which work is to be complete in course _____
(Not later than the beginning of the corresponding semester of the next academic year)

Grade to be recorded if work is not completed by deadline _____

Incomplete grade may be recorded **only** with the prior approval of the student's academic Dean.

Name of Dean who has approved grade of Incomplete _____

Instructor's Signature _____ Date _____

This form is sent to THE STUDENT'S ACADEMIC DEAN