



STUDENT INFORMATION			
Student Name:		Date:	
Telephone:		Track:	X <input type="checkbox"/> N <input type="checkbox"/> ZZ <input type="checkbox"/>

COURSE INFORMATION		
I, the undersigned, request to take an Incomplete for the following course in the time period:		
Requested Action:	Term	Year
<input type="checkbox"/> Request for Incomplete	<input type="checkbox"/> Fall	_____
Course ID # _____ Due Date for Incomplete _____	<input type="checkbox"/> Winter	_____
Title _____	<input type="checkbox"/> Spring	_____
Instructor Name _____	<input type="checkbox"/> Summer	_____
Please list any other Incompletes you have taken this academic year. Maximum of 3 incompletes per academic year (fall through summer):		
1. _____		
2. _____		

<p>Student must submit request for an incomplete to the instructor on or before the original course work due date.</p> <p>Instructor will sign the form and record a grade of I on the grade roster.</p> <p>Student in DJA or HMC must submit completed work with a Grade Change Form to the instructor no later than four weeks prior to the end of the following quarter.</p> <p>If final work is not submitted within the required time period, a failing grade will be recorded on the transcript.</p> <p>Students in the hybrid programs may take no more than three incompletes per academic year.</p>	<p>Required Signatures:</p> <p>_____ Student Date</p> <p>_____ Instructor Date</p> <p>Revised 6/2016</p>
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