

**NOTICE OF “INCOMPLETE” GRADE**

**Student’s Name:**

**Course Number and Name:**

**Semester/Term:**

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**Reason for incomplete:**

**Course requirement (s) to be completed:**

**Anticipated date of completion**

(Note: The deadline for submission of grades is the end of the sixth week of the next regular—fall or spring—semester. If more than one requirement needs to be fulfilled, a schedule of completion dates could be helpful).

**Grade to be entered if no further work is submitted:** \_\_\_\_\_

\_\_\_\_\_  
**Instructor** \_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Student** \_\_\_\_\_  
**Date**

(Student’s signature, indicating concurrence, should be obtained if possible).

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**Received by Registrar** \_\_\_\_\_  
**(initial)** **date**

**Copy to: Instructor**  
**Student**