



STUDENT AND COURSE INFORMATION:

Student Name: _____
(Last) (First) (Middle)

Student ID Number: _____ Professor: _____

Incomplete Grade Contract Effective Term: Fall Spring Summer Year: _____

Course Number: _____ CRN: _____
(Prefix-Course Number-Section – Example: BUAD 6300 010)

Reason for Request: _____

COMPLETED ASSIGNMENTS:

Has the student fulfilled enough work in the course to merit an Incomplete grade?

- Yes
- No

REQUIRED ASSIGNMENTS:

The following must be completed by _____. If the assignments are not completed by the deadline, the default grade of I/ _____ will be assigned. Assignments must be submitted and graded by the professor awarding the incomplete grade.

- Required Assignments (please specify – exams/quizzes/papers/projects)

SIGNATURES AND APPROVALS:

- I understand a default grade of _____ will be assigned if incomplete assignments are not submitted according to the contract.
- I understand the terms of this contract and agree to abide by the terms of this contract.

Student Signature: _____ Date: _____

Supervising Faculty Signature: _____ Date: _____

Incomplete Grade Contracts approved by the appropriate Office of the Dean are on file with the Office of the Registrar.

Dean's Office: _____ Date: _____

- Constantin College
- Satish & Yasmin Gupta College of Business
- Braniff Graduate School of Liberal Arts