NOTE: The last day to submit a Request for Incomplete is the last day of finals for the semester in which you are requesting an incomplete. This form must be filled out completely and have the signature of the professor of the class. All forms must be submitted to the Director of Records by 5:00pm on the last day of finals. Requests for Incomplete will not be accepted after this time.

Student Portion:
Directions: (1) Complete the student portion of the form. (2) Submit the form to the professor for signature confirmation of a passing grade in the course. (3) Submit completed form to the Director of Records for approval. Please note: An “I” will not be issued to the student until this form is received by the Director of Records.

Name: ___________________________________________ Date: __________________________

Email address: ___________________________________________ Phone: _________________________

Course number & name: __________________________________________

Course Professor: ___________________________ Semester: ___________________________

Reason for request (attach an additional page if needed):

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Assignments to be completed before grade is to be issued:

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

I understand that it is my responsibility to see that the assignments listed above are completed in a timely manner. If they are not completed by the last day of classes next semester, I understand that I will receive a grade of “F” in the course.

Student Signature: ___________________________ Date: __________________________

Professor Portion:

The signature is to confirm that the student listed above currently has a passing grade in this course.

Professor Signature: ___________________________ Date: __________________________

Approval by Director of Records:

Director of Records Signature: ___________________________ Date: __________________________

ESM 11/17/11