

Southwestern College

REQUEST FOR INCOMPLETE and PLAN FOR COMPLETION

Student _____

Course(Name &#)_____

Instructor _____

Term _____

STUDENT'S REQUEST:

I request a temporary grade of incomplete for the course indicated. I understand that the deadline for finishing my work will be 30 days after the beginning of the next semester, and that a grade of "F" will automatically be entered if the remaining work is not completed by then. I also understand I may petition for an extension of this deadline in the case of illness or other extenuating circumstances.

REASON WORK NOT COMPLETED:

INSTRUCTOR'S CONSENT:

I agree to this request. The following work remains to be done before a final grade can recorded:

Completion Deadline _____
(not more than 30 days after the beginning of the next semester)

Student's Signature

Date

Instructor's Signature

Date

THIS FORM IS TO BE FILED WITH THE REGISTRAR.
WE SUGGEST PHOTOCOPIES BE KEPT BY STUDENT AND INSTRUCTOR