

UNION COLLEGE
OFFICE OF THE REGISTRAR
INCOMPLETE GRADE REQUEST

STUDENT: This form **MUST** be completed and submitted to your instructor **BEFORE** the final day of exams. A separate form must be submitted for each course for which you request an 'I' - Incomplete grade. Fill out the top half of the form and give it to your instructor, *who will submit it to the Registrar's Office in Silliman Hall.*

Student **Printed** Name _____ ID _____

I am requesting an extension of time to complete the required work for the following course:

Course Number & Section: _____ Term: _____

Course Title: _____

*Student **Signature:** _____

*If the student is unavailable to fill out the form, the instructor or Dean of Studies may do so.

Extenuating circumstances justifying the incomplete grade:

INSTRUCTOR APPROVAL: I have agreed to grant the above student an Incomplete grade. The following work is needed to complete the course requirements:

Date Due: _____ Grade if no additional work submitted: _____

The work for the course must be completed no later than two weeks after the last day of the exam period. When the work has been completed, the instructor must submit the final grade on the "Grade Change Form," which can be found on the Registrar's website under Forms, or at: <https://www.union.edu/academic-affairs/policies-forms>. *For security purposes, please refrain from emailing the grade.*

Instructor's Approval Signature: _____ Date _____