



GRADE OF INCOMPLETE AGREEMENT FORM

Student Name	G Number	
Address	Is this a new address? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone	CU email	

SECTION 1: (To be completed by Student) I am requesting a grade of INCOMPLETE (INC) for:

Course	Course Professor
Justification for request of grade of Incomplete:	

SECTION 2: (To be completed by course Professor) I approve this request and assign the grade of Incomplete (or NP in Pass/No Pass courses) to this student with the understanding that the coursework listed below will be completed by end of following term or by the earlier date below, whichever comes first. Upon completion of the work, I will process a Change of Grade form. If the work is not completed within the specified time, the grade of Incomplete (INC) will automatically be changed to the present "backup" grade noted below.

Date of Completion: _____ (Default is end of the following term. An earlier date may be established by the course Professor.)

Present "Backup" Grade: _____ (Grade if no further work is completed.)

Coursework to be completed:

Outstanding Assignment(s):	Date Due(s):
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Student Signature _____ Date _____

Faculty Signature _____ Date _____

Associate Dean of Academics Signature _____ Date _____

Office of Academics ► Associate Dean of Academics ► Student Records

Associate Dean of Academics

Grade of Incomplete Approved until _____ (Date)

Student Records

- INC grade Inputted in Banner Back-up grade and date of default Inputted in Banner
- Scanned File & record in Student File