

# Student Request for Incomplete Grade

RETURN COMPLETED FORM TO THE REGISTRAR'S OFFICE, LH 216.  
(This form is not required for internships, field experiences or study abroad.)

Student : \_\_\_\_\_ ID#: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Campus Box: \_\_\_\_\_

Course No./Title: \_\_\_\_\_ Term: \_\_\_\_\_

Instructor(s): \_\_\_\_\_

**"I (incomplete)** means students have postponed required work with prior consent of the instructor(s) and for reasons beyond their control: physical or emotional conditions precluding timely progress in or completion of courses as confirmed by appropriate professionals or catastrophic exigency affecting students' families. Assignment of a grade of I is at the discretion of the instructor, and should be contingent on the provision of appropriate evidence by the student.

Incomplete work must be completed by the fourth week of the next four-month term or grades of I become F. Grades of I may also be issued until field experience, internship, laboratory research, or study abroad work is completed and evaluated." Wartburg College Academic Catalog

**I am requesting an incomplete grade as per the policy stated above and I agree to complete the coursework by the deadline stated in the policy. The reason for the incomplete has been discussed with my instructor(s) whose signature below indicates our commitment to the policy stated above. In addition, I understand that I will be ineligible for the Dean's List for the term in which I receive the incomplete.**

Anticipated Completion Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(The Department Chair Signature is *required* for instructors who will not be on campus during the term in which the incomplete grade change is due; *optional* for others.)

## Registrar Office Only

Date Rcvd: \_\_\_\_\_

Date Complete: \_\_\_\_\_

Final Action: \_\_\_\_\_