

**Request for a Grade of Incomplete**

Office of the Registrar

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Lumbee Hall Room 133 / Phone: 910-521-6298 / Fax: 910-521-6328 / registrar@uncp.edu

**Note: The instructor may set any deadline for completion of work within the one-semester period. For military students called to active duty see UNC Policy 700.7.7[R]. VI. C. 2.**

*Incomplete Policy:* The "I," or incomplete grade, is given when a student is unable to complete required work because of an unavoidable circumstance such as illness. It is not to be given to enable a student to do additional work to improve a grade. Assigning the “I” grade is at the discretion of the individual instructor. It is the student’s responsibility to request the “I” grade. A Contract for the Completion of Incomplete “I” Grade must be filled out by the student and instructor and filed with the instructor’s Department Chair and Registrar. Generally the student will have completed most of the work required for the course before the “I” is requested. An incomplete must be removed within one semester (excluding summer term) or it will automatically be converted to a grade of “F” by the University Registrar. In determination of quality hours and quality point averages, an “I” is counted as an “F” until it is removed. An “I” does not fulfill prerequisite requirements. **Form must be submitted to Instructor no later than the last day of final exams in the term requesting an “I” grade.**

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| **STUDENT INFORMATION** |
| UNCP ID:  | **8** | **4** | **0** |  |  |  |  |  |  | **Semester for which the grade of “I” is being requested:** Fall \_\_\_\_ Spring \_\_\_\_ SS I \_\_\_\_ SS II \_\_\_\_ |
| Last | First | Middle | Suffix(Jr., II, etc.) |
| Home Phone: | Cell Phone: | Email:  | ***@bravemail.uncp.edu*** |
| Mailing Address: | City: | State: | Zip: |
| **Reason for requesting an Incomplete Grade**: Incomplete grades are approved only for circumstances beyond the student’s control. * Valid reasons might include extended illness, death of a loved one, etc. **Attach supporting documentation and submit with this form.**
* Invalid reasons include: student elected not to complete the course on time, would otherwise fail the course, didn’t withdraw, etc.

*Below, write clearly and briefly, the reason(s) why you are requesting a grade of Incomplete:* |
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| **COURSE #** | **SECTION** | **INSTRUCTOR** | **COURSE TITLE** |
|  |  |  |  |
| I understand that if my request is approved and I do not complete the course work listed below by the due date stated, the grade for this class will revert from an “I” to an “F.” It is the responsibility of the student to see that work is completed and submitted by the agreed upon date. I also understand that I cannot register for any course(s) in which I have an "I" grade. |
| Student Signature: | Date: |
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| **INSTRUCTOR’S SECTION** |
| If the Instructor approves the Incomplete request, one form per course must be completed. The Instructor must sign/date, obtain the Dept. Chair’s signature, **retain a copy** and submit original to the Registrar’s Office. Once the student has completed the requirements and a grade has been assigned or the student has not completed the assignments by the deadline, the instructor must complete a Grade Change form found in the Registrar’s Office or on the website and submit to the Registrar so the student’s grade can be input. *If instructor denies the Incomplete request, there no need to forward this form.* |
| **Course Completion Information***(Assignments or Exams needed to complete this course in order shown.)* |
| 1. | Due Date: | 4. | Due Date: |
| 2 | Due Date: | 5. | Due Date: |
| 3. | Due Date: | 6. | Due Date: |
| **Instructor’s Deadline for Completion of All:** *Assignments not completed by this date will revert to an F for the final course grade.* |
|  | The request for Incomplete is DENIED and the student assigned a grade based on work completed. |
|   | Documentation supporting the Incomplete request has been reviewed, the request is approved, and the student has been assigned a grade of “I”. |
| Instructor’s Name (print): | Instructor’s Signature: | Date: |
| Dept. Chair’s Name (print): | Chair’s Signature: | Date: |

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