



THE CATHOLIC UNIVERSITY OF AMERICA
OFFICE OF THE REGISTRAR

REQUEST FOR EXTENSION OF INCOMPLETE FORM

--	--	--	--	--	--	--

STUDENT'S ID

STUDENT'S LAST NAME

STUDENT'S FIRST NAME

SEMESTER/YEAR: _____

COURSE SUBJECT/NUMBER/SECTION: _____

COURSE TITLE: _____

REASON FOR REQUEST: _____

WORK TO BE COMPLETED: _____

STUDENT AGREES TO SUBMIT ALL WORK OUTSTANDING BY THIS DATE: _____

DATE: _____ STUDENT'S SIGNATURE: _____

FINAL GRADE TO BE SUBMITTED BY THIS DATE: _____

DATE: _____ INSTRUCTOR'S SIGNATURE: _____

STUDENT'S DEAN'S NAME (PLEASE PRINT): _____

DATE: _____ STUDENT'S DEAN'S SIGNATURE: _____

Instructions:

Under extraordinary circumstances, but before the date of the mid-semester following a reported incomplete, a student may petition the instructor of the course and the academic dean of the school in which the student is enrolled for an extension of the period normally allowed for removal of the incomplete. Extensions of incompletes may be granted only for one additional semester. Extended incomplete grades must be removed before the mid-semester of the succeeding academic term.

The student requesting an extension of incomplete should complete sections one and two of the form and submit to his/her instructor. The instructor will note the outstanding work to be completed and determine a date by which the student must submit the work. The instructor and student will sign section three and submit to the student's academic dean for approval. If approved, the student's dean should sign the form and submit it to the Office of the Registrar.