

# CUArch

School of Architecture and Planning

## GRADE OF INCOMPLETE REQUEST FORM (I) For Graduate Students

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_

Course Number and Title \_\_\_\_\_

Academic Year \_\_\_\_\_ Semester (circle one) Fall Spring Summer

Instructor's Name \_\_\_\_\_

Please print

Please state why you were unable to complete all academic requirements for course listed

above: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The grade of Incomplete (I) will be recorded for the above course. You are encouraged to complete the work as soon as possible. **All work for this course is to be completed and submitted to the teacher by the following date** \_\_\_\_\_.

**The Incomplete grade must be resolved by the date listed above. Failure to change the grade by mid-term of the following semester results in a grade of "F" for the course.**

The remaining work includes:

\_\_\_\_\_

\_\_\_\_\_

Please sign below to indicate your acceptance of these requirements. Keep one copy of this form for your records.

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

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