

COMPUTER SCIENCE DEPARTMENT
PETITION FOR "I" (INCOMPLETE) GRADE

Name _____ Semester/Yr _____

Major _____ Phone _____

Email Address _____

Course: _____ Course # _____ Sec # _____ Units _____

An incomplete grade may be assigned only in those cases where the instructor concludes that a clearly identifiable portion of course work cannot be met by the student within the academic term for unforeseen reasons. It is the responsibility of the student to bring pertinent information to the instructor and to reach agreement on the means by which the remaining requirements will be satisfied. The Incomplete must be made up within one calendar year or be counted as an "F" or ("NC") for grade point average and progress points. The conditions for removal of the Incomplete grade must be stated in writing below. In those cases where the student is not available (sickness, emergency, etc.) and the instructor is satisfied that an Incomplete grade should be awarded, the instructor may submit this form to the department office and assign the Incomplete grade.

INSTRUCTIONS TO STUDENT:

1. Read the above.
2. Complete your part of this form.
3. Submit form to Instructor for approval; sign below to indicate agreement with conditions.
4. Return form to department office for Chair's approval.

(UNFORESEEN) REASON FOR INCOMPLETE (this section must be completed): _____

CONDITIONS FOR REMOVAL OF INCOMPLETE GRADE (Instructor: Please make clear what work needs to be completed; retaking the course is not an option.) _____

Student's Signature

Date

Approved: Instructor's Signature

Date

Approved: Department Chair's Signature

Date

Distribution: White – Department File Copy; Yellow – Instructor Copy; Pink – Student Copy (when approved)