



Mt. San Jacinto College
REQUEST FOR INCOMPLETE GRADE

This form to be submitted by instructor with his/her final grade

Name _____ I. D. # _____

Address _____

Section # _____ Course I. D. _____ Term/Year _____

Instructor (Please Print) _____

By mutual agreement of instructor and student, the grade of "I" (Incomplete) has been assigned. The requirements necessary to complete the course are understood. The requirements must be completed and a new grade assigned within six weeks of the beginning of the subsequent semester (excluding Summer Session) indicated above. Instructors may change an incomplete grade to a letter grade before the six week deadline, but no later than one year from the grade assigned.

Reason for Requesting Incomplete Grade: _____

The assignments to be completed are (please enumerate): _____

If the above assignments are not completed within six weeks of the beginning of the subsequent semester (excluding Summer Session); the assigned grade is: _____
A, B, C, D, F, (P or NP if P/NP Class or grading option)

If you wish an extension of the six week deadline, please state your reason(s): _____

Extension Deadline

Instructor's signature

I understand to change student's "I" grade that I must submit a Change of Grade form to the Enrollment Services Office.

Instructor's Signature _____ Date _____

Student's Signature _____ Date _____

OFFICE USE ONLY

Final Grade _____ Posted By: _____

Date: _____