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OFFICE USE ONLY	
Date Recorded:	_____
Recorder Initials:	_____

INCOMPLETE GRADE REQUEST

Student Name: _____	
Student ID: _____	Academic Level: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate
Academic Year: _____	Semester: _____

COURSE INFORMATION		
Course Code: _____	Section: _____	Title: _____

RATIONALE FOR REQUESTING INCOMPLETE GRADE
<p>Incomplete grades are approved only for circumstances beyond the student's control. A valid rationale is mandatory prior to review of the incomplete request form. For example:</p> <ul style="list-style-type: none"> • Valid <u>academic</u> reasons might include unanticipated difficulty obtaining research materials, or failure of a critical experiment. • Valid <u>non-academic</u> reasons might include extended illness, or death of a loved one, etc. • <u>Invalid reasons</u> include: student elected not to complete the course on time, or student would otherwise fail the course, etc. <p>Explanation for Incomplete Grade: _____</p> <p>_____</p> <p>_____</p> <p>_____</p>

ACKNOWLEDGEMENT
<p>NOTE: Incomplete Grade Request Forms must be received by instructor by the final exam date, or other ending date of the course, <u>whichever comes first</u>. Courses not completed by the specified deadline will receive a grade of "F" in accordance with University policy.</p> <p>Student Signature: _____ Date: _____</p>

INSTRUCTOR SECTION
<p>Deadline for Course Completion: _____</p> <p><i>Deadline may not exceed one semester beyond the scheduled end-date of the course. Faculty may designate an earlier deadline, but not later.</i></p> <p>Work to be Completed: _____</p> <p>_____</p> <p>_____</p> <p>Instructor Signature: _____ Date: _____</p>