White Copy- Student
Yellow Copy- Instructor
Pink Copy – Associate Dean

Incomplete Coursework Contract

I, _____ (Social Security No._____),
(Name)
agree to complete _____,_____ of
(Course #) (Course Title)
which I had been enrolled during the _____ semester of 20_____ by
(Fall, Spring, Summer)
completing the coursework on or before _____ _____, 20___.
(Month) (Day) (Yr.)
Upon completion of the coursework, a grade of an A, B, C, D, or F will be issued.

I understand that if the coursework is not completed by the date shown above, the grade of "I" received during the regular enrolled semester will automatically revert to a grade of "F".

Coursework to be completed:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Agreed to by _____ Date _____
(Student's Signature)

The coursework has been completed and I recommend a grade change at this time.

_____ Date_____
(Instructor's Signature)

When the coursework has been completed, the instructor will complete a Change of Grade Form.

12/09/02