



Incomplete Grade Request Form

Section 1 (To be completed by the student. Submit form to instructor when complete)

DePaul ID #: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Course #: \_\_\_\_\_ Section #: \_\_\_\_\_ Quarter: \_\_\_\_\_ Year: \_\_\_\_\_

Reason for requesting an incomplete (attach separate document if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signing this form indicates an understanding that:

- You should not re-enroll in the class
- You must work independently with your instructor regarding all required assignments and exams
- You are given a maximum of two academic quarters to complete all work. If not complete by that time, your grade will automatically revert to a grade of F
- Online material in CDM’s course management system is not available to you after the last day of the term in which you were enrolled in the course
- Failure to complete all requirements by the arranged date may result in a failing grade.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Section 2 (To be completed by the instructor. Submit form to Dean’s Office when complete)

Requirements for course completion: \_\_\_\_\_

\_\_\_\_\_

Final date to fulfill requirements: \_\_\_\_\_

Instructor name (please print): \_\_\_\_\_

Instructor signature: \_\_\_\_\_ Date: \_\_\_\_\_

Section 3 (To be completed by Dean/Associate Dean. Submit form to Academic Success Ctr. when complete)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Notes:** An incomplete is given only for an exceptional reason. Any such reason must be fully documented before an incomplete can be given. All incomplete requests must be approved by the Dean/Associate Dean. A copy of this request will be placed in the student’s academic file and the student will be notified of the result via email. All remaining requirements must be completed with the original instructor.