

UNIVERSITY OF WEST GEORGIA

Incomplete Grade Form

Student Name:	Student ID:	
reasons, or government obligatic the student and department chai The Department office will mair	ay assign a grade of "Incomplete" for medical reasons, personal, ns (e.g., jury duty, military service). The faculty member must p with a detailed description of the work that remains to be com rain this form on file until the student completes the course nember to submit the grade change to the Registrar's office who	pleted.
Course Prefix and Number:	CRN: Semester/Year:	

Name of Course: _____

Student's grade to date, excluding work required to complete the course: ______

Reason for Incomplete Grade:
Medical Personal/Family Government Obligation (e.g., jury duty, military service)

Note: It is the student's responsibility to complete the work within the University's time frame or the grade will automatically convert to an F.

<u>Undergraduate Students</u>: A student must remove an "I" grade during the succeeding semester of enrollment or within one year, which-ever comes first; otherwise, the grade will be changed to "F". For more information, see the Undergraduate Catalog: https://catalog.westga.edu/content.php? catoid=14&navoid=938#grades-grade-points

Graduate Students: An "I" must be removed by the completion of work within one calendar year or the "I" will become an "F". For more information, see the Graduate Catalog: https://catalog.westga.edu/content.php? catoid=15&navoid=997#grading-system-for-graduate-students

Description of work to be completed	Due date(s)

Faculty Member	Department Chair
By signing below, the faculty member indicates the student has been assigned the grade of <i>Incomplete</i> and that the faculty member will submit the grade change when the work is completed within the required time frame.	By signing below, the department chair attest to being made aware of the assignment of a grade of <i>Incomplete</i> by the faculty member.
Printed Name:	Printed Name:
Signature:	Signature: