School of Education
Report on Grade of Incomplete Form
(See reverse side for DePaul policy regarding the grades of incomplete)

Student’s Name __________________________________________    DePaul Student ID# _________________________

Student’s E-mail address   ___________________________________________________________________________

Course & Dept. ______________________ Section ___________________     Hours ___________________________

Year and quarter __________________________________________(Fall; Winter; Spring; Summer I; Summer II; Summer)

Instructor’s Name __________________________________________

Reason for Incomplete (Attach any supporting documentation available):  ___________________________________________________________________________________

Instructor’s Deadline for Completion _____________________________________________________________________

Note: Undergraduate and Graduate students have two quarters to complete an incomplete.

Nature of work to be completed (if a paper, length and topic; if an examination, type and material covered)

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

Grade on coursework already completed ____________________ Relative Weight  ___________________ %

Note: Incompletes cannot be processed without inclusion of relative weight.

May the student receive credit for the course if the work to be completed is not done? _____ Yes _____ No

Rationale:

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Student’s Signature __________________ Date ___________ Instructor’s Signature __________________ Date ___________

Note: In the event that a student’s signature cannot be obtained, the instructor of record must complete the rationale above for granting permission for the grade of incomplete

Department Chair’s Signature __________________ Date ___________

Department Chair: In the event that the original faculty member is no longer available, to grade this student indicate who will resolve the incomplete other than the original instructor:

Note: Change of instructor must be approved by the Associate Dean

Associate Dean’s Signature __________________ Date ___________

Donovan/Gonzalez  2008
INCOMPLETE GRADE

This is a temporary grade indicating that the student has a satisfactory record in the work completed, but for unusual or unforeseeable circumstances not encountered by other students in the class and acceptable to the instructor, is prevented from completing the course requirements by the end of the term. An incomplete grade may not be assigned unless the student has formally requested it from the instructor in writing, and the instructor has given his or her permission for the student to receive an incomplete grade.

Original must be filed in the Associate Dean’s office. The Associate Dean’s office will send copies to the student and faculty.