



INCOMPLETE GRADE REQUEST

INCOMPLETE GRADE POLICY INFORMATION

The request for an Incomplete (I) grade is to be student-initiated. It is granted only based on an illness or a similar exceptional circumstance that materially affects the student's ability to complete all course requirements. **An incomplete will not be granted solely based on a student needing more time.** Furthermore, students should have completed at least 70 percent of the coursework with an overall passing grade before an incomplete grade is granted. Students must obtain signatures of course instructor and chair/dean before submitting this form to the Records and Registration office for processing and recording.

Deadline: Incomplete grades must be cleared by 90 days from the last day of the semester, including summer, unless the instructor provides an earlier date on the form. The exception is for COL undergraduate students whose incomplete grades must be cleared by the second 7-week course in the following semester, including summer. An Incomplete grade that is outstanding after the deadline will be changed to the grade recorded by the course instructor on this form, or to an F grade.

An additional extension of no more than 90 days extra will be considered in cases of extreme circumstances by the appropriate dean or chair.

Students may lose federal financial aid eligibility if they receive all I grades or a combination of I grades. Students are encouraged to email Grades@evangel.edu with questions.

STUDENT AND COURSE INFORMATION

Student Name: _____ Date: _____ Student ID: _____

Course #: _____ Title: _____ Semester : ___ FA ___ SP ___ SU Year: _____

STUDENT STATEMENT:

I am unable to complete the requirements for the above course due to:

___ Illness ___ Death in Family ___ Accident ___ Other _____

Student's Signature: _____ Date: _____

FACULTY/DEPARTMENTAL STATEMENT:

- I approve of this Incomplete grade request. The course work must be submitted within 90 days following the last day of class or earlier on the following date _____.

The extension of time requested will permit the student to complete work that may affect the overall evaluation. The extenuating circumstances described above were a factor in the student's inability to complete the work. I agree to supervise the completion of this work. If the student chooses not to complete the work, I request that a grade of ___ be recorded as the final grade.

- I disapprove of this Incomplete grade request because: _____.

SIGNATURES

Instructor's Signature: _____ Date: _____

Official Signature (Dept. Chair/Director): _____ Date: _____

Student is to obtain instructor and chair/director signatures and submit fully signed form to Grades@evangel.edu/Records and Registration, Riggs Hall, 304.