TEXAS STATE UNIVERSITY
SAN MARCOS
The rising STAR of Texas

INCOMPLETE GRADE FORM

TO BE COMPLETED BY FACULTY MEMBER WHEN AN "I" GRADE IS APPROVED

Student ID A	NAME: LAST FIRST MI		DATE (mm/dd/yyyy)
Department	Prefix COURSE Number	Section #	SEMESTER TAKEN _____YR __Fall __Spr __Sum I __Sum II

Reason for Incomplete Grade: (Please be specific):

A grade of "I" is assigned for one reason only: failure of a student to complete a vital portion of a course (final examination, paper, etc.) because of a situation beyond the student's control. Additionally, the automatic "W" deadline must have already passed. If the automatic "W" period has not expired, the student should be advised to withdraw from class rather than assigning an Incomplete.

What percentage of the required course work has the student completed? _____%. Please provide details.

What is the grade average of the completed work? _____

Please indicate what work should be completed by the student for the "I" grade to be removed. Be specific and include a definite deadline for completion of work.

If the above requirements are not met by (Date) _____, a permanent grade of _____ will be assigned.

_____ Student Signature Date	_____ Instructor Signature Date

Please distribute copies as follows. Instructor and department to retain their copy per university retention schedule or until resolved.

1. Student
2. Instructor
3. Department