Petition for Grade of “Incomplete”

University of San Diego Professional and Continuing Education policy states that a student and instructor make a written agreement defining the work that should be completed within 60 days of the final class meeting or online course end date. This form will serve to document the arrangement by describing the work to be completed and the required completion date.

To be completed jointly by student and instructor (please print):

Student’s Name: ___________________________________________________________  Student ID#____________________
    Last  First  Middle
Course#: _____________________ Course Title: ____________________________________________
Course Location: ______________________________
Instructor’s Name: _______________________________________________________
Dates of Course: ______________________________
Reason for assignment of “Incomplete”: ____________________________________________

Description of work to be completed to receive grade: ________________________________

Date by which completed work will be submitted: ________________________________

To submit work student will contact instructor via: ________________________________

Student Signature: ________________________________________________________  Date: _______________________

Instructor Signature: ________________________________________________________  Date: _______________________

Make copies of the completed form, distribute as follows:
Instructor: return the signed form to the Program Manager in Professional and Continuing Education. Retain a copy of the form and submit to the Program Manager when final grade is awarded.
Student: retain a copy for your records.

To be completed only by instructor to submit final grade:
When the requirements for course complete are met, the instructor assigns a grade, signs, dates, and returns this petition to Professional and Continuing Education.

Date Work Completed: ______________________________  Final Grade: ______________

Instructor Signature: ________________________________________________________  Date: _______________________
