REQUEST FOR INCOMPLETE GRADE

DMTC does not encourage students to request incomplete grades. However, a grade of “I” (Incomplete) may be assigned under the following conditions:

- A request stating the circumstances for the request must be made in writing to the instructor no later than one week prior to the end of the semester.
- Work was not completed due to a documented illness, accident, or other unavoidable absence.
- A student receiving an Incomplete is responsible for completing the course requirements within the first ten school days of the following semester unless prior arrangements are made with the instructor. Generally, if the Incomplete is not removed in this time, a letter grade of “F” will automatically be assigned.
- The student is not on probation and does not have an unfinished incomplete from a previous semester.

**Student Information Print Clearly**

Student Name: ____________________________________________ Email: _________________________________________________

Address __________________________________________________________________________________________________________

Home Phone ____________________________________________ Cell Phone ___________________________________________________

**Part I – To be completed by student**

Date of Request: __________________________ Class Section: __________________________

Course Title: __________________________ Instructor: __________________________

☐ I am not on probation ☐ I do not have an unfinished incomplete from a previous semester.

Reason for request (if medical, a doctor’s note must accompany this request)

________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________

I understand DMTC’s policy regarding incomplete work and I understand my instructor’s expectations regarding the completion of the remaining course requirements outline below. I understand that my grade will be changed to “F” if I fail to meet these requirements.

Student Signature ____________________________________________ Date ______

**Part II – To be completed by instructor**

Course Requirement __________________________________________________________________ Due Date________

Course Requirement __________________________________________________________________ Due Date________

Course Requirement __________________________________________________________________ Due Date________

Course Requirement __________________________________________________________________ Due Date________

I have requested a grade of “I” be assigned for the course indicated. A timetable for completion of course requirements is indicated above. I will notify the Registration Office when requirements are met.

Instructor Signature ____________________________________________ Date ______

Director or Assistant Director Signature ____________________________________________ Date ______