

INCOMPLETE COURSEWORK PLAN

INSTRUCTIONS *(Please use ink)*

Professors: Complete and submit original form to the Admission and Registrar's Office. Please sign and date. A copy of this form must be completed for every student receiving an "I" grade.

The following student has been assigned a grade of **INCOMPLETE** in the course:

Student Information:	Incomplete Course:
Student Name: _____ Polk State Student ID: _____	Course #: _____ Reference #: _____ Term: _____

Reason for "I" Grade: _____

COMPLETION PLAN RECOMMENDED

To receive a grade other than FAILING, the student **must complete** the following assignment(s) or course requirement(s) by a mutually agreed upon date between the faculty member and the student prior to the end of the next succeeding term. The last possible day for these requirements/assignments to be completed/received is: _____ *(specify date)*.

Professor Name: _____

Professor Signature: _____ **Date:** _____

I acknowledge that I have received a copy of this form and understand the requirements that must be completed to resolve the Incomplete Grade. I understand that if I do not complete these requirements by the designated deadline, I will receive an "F" in this course. If I do complete them, the professor will assign the grade earned. *(Note: If the student cannot sign the form, the professor should note how this information was conveyed on the student signature line, for example, email or phone.)*

Student Signature: _____ **Date:** _____

Received in Academic Dean's Office by: _____ **Received date:** _____
(Signature)

Document to remain on file in the Dean's office.