

INCOMPLETE GRADE REQUEST AND AGREEMENT FORM

PLEASE READ INSTRUCTIONS BEFORE SUBMITTING THIS FORM

- A student-initiated request must be made within fifteen (15) calendar days of the course end date by submitting this form to the instructor.
- If the instructor, in consultation with the Department Chair, determines a grade of IN is appropriate, they are responsible for entering the grade in the student information system or submitting a grade change form, if applicable.

Reference: Grading Policy and Grading Procedure

PART 1 STUDENT & COURSE INFORMATION

MacEwan ID	Family (Last) Name:	First Name:	Middle Name:
Program:			
Course:	Section:	Course Name:	Term:

PART 2 STUDENT INITIATED REQUEST - To be completed by the student within 15 calendar days of the course end date.

1. I am requesting my course end date be extended to: _____
2. Reason for request:

Date: _____ Student's Signature _____

(Typed name will be accepted if sent from a student @mymacewan.ca email account)

PART 3 TO BE COMPLETED BY INSTRUCTOR

1. Course work must be submitted to the Instructor by: _____
(completion deadline is recommended to be no more than 60 calendar days from original course end date)
2. If the course work is not submitted by the above date the Office of the University Registrar shall record a lapse grade of _____
3. If a grade change is not submitted to the Office of the University Registrar within 5 business days of the deadline, the lapse grade will be recorded on the student record (default lapse grade of F will be assigned unless otherwise stated).
4. Instructor Comments: _____

PART 4 FINAL AGREEMENT

Student's Signature: _____ Date: _____
(Typed name will be accepted if sent from a student @mymacewan.ca email account)

Instructor Signature: _____ Date: _____

Department Chair Signature: _____ Date: _____

The Instructor is responsible to inform the student of the final decision and any conditions, and enter grade of IN on the student record or submit Grade Change Form, if applicable.

The Chair is responsible to submit this form to the Office of the University Registrar.

OFFICE USE ONLY

PROCESSED BY: _____ DATE: _____

PERSONAL INFORMATION COLLECTION NOTICE

The collection of the personal information requested in this form is authorized under section 4(c) of the *Protection of Privacy Act* (POPA). It will be used for administration of services and management of student records and will be entered into and retained in the official university student information system database. Questions about the collection and use of this personal information should be directed to the Associate Registrar, Student Records and Services, in the Office of the University Registrar,