

SAMUEL MERRITT UNIVERSITY

Office of the Registrar

3100 Telegraph Ave., Suite 1000

Oakland, California 94609

Phone: 510.869.1550 Fax: 510.869.6204

INCOMPLETE GRADE PETITION

STUDENT COMPLETES THE FOLLOWING:

Print Name: _____

Signature: _____ Today's date: _____

ID Number: _____

I request an incomplete grade for the _____ term, _____, in the following course:
Spring/Jan/Summer/Fall year

DEPT.	COURSE #	SECTION #	COURSE TITLE
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I understand that my grade in the course will become an F (U for clinical course) if all remaining course work is not satisfactorily completed by the end of the next semester.

A grade of "I" may be assigned by the faculty member when the student's work is substantially complete yet incomplete due to circumstances beyond the student's control. A petition for an incomplete must be initiated by the student, and approved in writing by the faculty member, prior to the deadline for the submission of the term grades. It is not the responsibility of the faculty member to petition for an incomplete grade, but an instructor may originate an incomplete grade if the student is unable to do so, and has specifically requested an incomplete grade from the instructor.

INSTRUCTOR COMPLETES THE FOLLOWING:

Instructor name: _____

Instructor signature: _____ Today's date: _____

The reason for the incomplete grade: _____

The work to be completed is: _____

REGISTRAR'S OFFICE USE ONLY:

Request reviewed by: _____

Date: _____

cc: instructor
student