

INCOMPLETE GRADE CONTRACT

Quarter: _____

Year: _____

Student name: _____ ctcLinkID: _____

Class #: _____ Dept.: _____ Course #: _____ Number of credits: _____

Description of outstanding work to be complete:

Students who for sufficient cause 1) have not completed work necessary to and required by the course, and 2) who discussed the requirements and have made the arrangements with the instructor to complete the missing work will be assigned an incomplete "I" grade. Identified work must be completed and submitted to the instructor within one quarter or a fail grade will be assigned and entered on the permanent student record.

Instructor's Signature

Date

Student's Signature

Date

NOTE TO INSTRUCTOR: Incomplete grades are issued at the discretion of the instructor only. Copies should be given to both the student and Enrollment Services - registration@skagit.edu.

FOR OFFICE USE ONLY

Incomplete grade entered:

Grade Change Entered:

Name/date: _____

Name/date: _____