

PLEASE MAKE SURE ALL COPIES ARE LEGIBLE

INCOMPLETE GRADE CONTRACT



Records Office
B-150 ASB

Student's Name _____
Last First Middle

Local Address _____

City _____ State _____ Zip Code _____

Local Phone _____ Soc. Sec. No. _____

Brigham Young University
Provo, Utah 84602
(801) 378-2631

TO BE COMPLETED BY INSTRUCTOR:

Date _____

1. Incomplete Grade for _____ for the _____ 19_____.
Dept. Name Course No. Section No. Semester/Term

2. Reason for giving Incomplete Grade (See # 2 back of form): _____

3. To complete course requirements, student must do the following: _____

4. Required date to complete requirements (not to exceed one year): _____
(Note: An Incomplete is computed as a failing grade until the work is completed and the official grade is submitted by the instructor.)

5. _____
Student's Signature Instructor's Signature

ATTENTION: Yellow copy of contract (approved, signed, and fee paid) must be submitted with grade roll at end of semester/term.

Address _____

Phone _____

TO BE COMPLETED BY INSTRUCTOR WHEN COURSE REQUIREMENTS HAVE BEEN COMPLETED:

Final Grade _____

Date _____

Instructor's Signature
(Authorizing Grade Change)

DISTRIBUTION:

- White/Green: Submit to Records Office when course requirements have been completed.
- Yellow: Submit with grade roll at end of semester
- Blue: Student copy

\$10.00 fee required. Must be paid in advance. Pay fee at Cashiers Office, D-148 ASB.