

INCOMPLETE FORM

University of Arkansas at Little Rock
Donaghey College of Science, Technology, Engineering, and Mathematics

NAME _____ Date _____

ID # _____

COURSE _____ DEPARTMENT _____

SEMESTER _____ YEAR _____

1. Have you applied for graduation this semester? YES /NO
If YES, all requirements needed to change the grade of "I" to a letter grade **MUST** be completed on or before the date of graduation. The date of commencement for this semester is _____. If the "I" is not removed by this date, you must reapply for graduation for the next semester.
2. If you have NOT applied for graduation this semester, you have 90 days from the end of this semester to convert the grade of "I" to a letter grade. After 90 days, the "I" will automatically convert to an "F".

REASONS FOR INCOMPLETE: (To be filled in by the instructor and explain exactly the work that needs to be completed and the deadlines for completion.)

DATE FOR ALL WORK TO BE COMPLETED _____

FACULTY SIGNATURE _____

*STUDENT SIGNATURE _____

** I acknowledge that I have read and understand # 1 and # 2 above.*

Distribution: Copies to the Student, Instructor, and Department Chair.