



# Incomplete Grade

Submit completed form by email to Cheri Garcia at [garciac@mjc.edu](mailto:garciac@mjc.edu) or in-person to Enrollment Services within 72 hours of grade finalization.

Today's Date: \_\_\_\_\_

## Student Information

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Student ID: w \_\_\_\_\_

## Course Information

Instructor Name: \_\_\_\_\_ Term/Year: \_\_\_\_\_

Course Name: \_\_\_\_\_ Section #: \_\_\_\_\_

### School Policy & Procedures for Incomplete Grades:

**An incomplete (I) grade will be given only in cases in which course work could not be completed because of illness or for a cause judged unavoidable by the instructor. Failure to complete regular course work by the end of the semester will not be reason for giving a grade of Incomplete (I).** When a faculty member approves a grade of (I) Incomplete, he or she: will enter on PiratesNet an incomplete and the in-lieu grade that will be recorded if the student does not make up the work in the allotted time; will enter on PiratesNet the date on which the incomplete grade will end and the in lieu grade will be awarded; will submit to the Enrollment Services Office a written record (on the Incomplete Form provided) of the conditions for removal of the (I) grade and the grade to be assigned if the work is not completed; will send notification via email to the student using the college-issued student email outlining the work to be completed and timeline; will write the student's grade when all work has been completed on the Incomplete Form in the Enrollment Services Office at least five business days prior to the expiration date of the incomplete grade.

**REASON FOR INCOMPLETE GRADE:**     Student Illness     Cause judged unavoidable by the instructor

Note: Students cannot receive an incomplete grade to retake the course.

Please describe reason Incomplete Grade is being assigned to this student: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**DATE INCOMPLETE REVERTS TO IN LIEU OF GRADE (Not to exceed one year):** \_\_\_\_\_

**GRADE IN LIEU OF REMOVAL:**     A     B     C     D     F     P     NP

I have reviewed the conditions with the student and notified him/her in writing via email as outlined in policy stated above.

**Instructor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Dean Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OFFICE USE ONLY - TO BE COMPLETED UPON VERIFICATION OF ABOVE CONDITIONS**

COMPLETED     DID NOT COMPLETE    **Instructor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Grade Awarded:**     A     B     C     D     F     P     NP

**Enrollment Services Verification:** \_\_\_\_\_ **Date:** \_\_\_\_\_