

Registrar's Office  
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**REQUEST FOR EXTENSION  
 OF THE  
 INCOMPLETE OR  
 IN PROGRESS DEADLINE**

**FACULTY REQUEST FOR EXTENSION (Incomplete/In Progress Grades Only)**

In extraordinary circumstances the faculty may request an extension to the Incomplete/In progress deadline. This extension may be granted for one semester. Any additional extension requires the approval of the School Dean or Department Chair.

_____ Student's Name	_____ Student ID #
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_____ Course ID # / Sec (e.g. ART 101-01)	_____ Course Title (e.g. Art Fundamentals)	_____ Credits	_____ Term / Year (e.g. Fall 2009)
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I am requesting an extension of the Incomplete/In Progress deadline for the student above. Reason for extension:

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\_\_\_\_\_

\_\_\_\_\_

*Prior to end of semester – Date:*

_____ <b>Faculty Signature</b>	_____ <b>Date</b>
_____ <b>School Dean or Department Chair Signature</b>	_____ <b>Date</b>
_____ <b>Not Approved</b> _____ <b>Approved</b>	_____ <b>(Final University Approved Extension Date)</b>
<input type="checkbox"/> <b>Email notification to Student</b>	
<input type="checkbox"/> <b>Email notification to Instructor</b>	
_____ <i>Initial / Date Processed by Registrar's Office</i>	
Revision Date: 02/1/09	