

Application and Authorization for Incomplete Grade

Name : _____
Last (please print) First Middle

Goucher ID Number : _____ Date : _____

Course Number & Section : _____ Course Title : _____

Instructor : _____ Term/Year : _____

Incompletes at Goucher College are given only for reasons beyond the student's control, namely medical reasons or death in family. **Incompletes are intended to apply to cases where the student has completed at least 75% of the work of the session.** The instructor has the right to deny an application for an incomplete. The complete policy regarding incomplete grades and their resolution can be found in the college catalogue at <https://catalog.goucher.edu>

Work to be completed :

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Instructor/Student agreed completion date for all remaining work

I have read and understood that all work must be completed no later than the last day of the **fourth week** after the final experience for all **fall semester** courses, and no later than the last day of the **fifth week** after the course end for **spring semester**, and that papers, projects and examinations must be submitted directly to the instructor by that date.

For **Fall course**, completion date no later than **4th week** after final experience: _____

For **Spring course**, completion date no later than **5th week** after final experience: _____

Student's grade if no incomplete work submitted by deadline : _____

Student Signature : _____ Date : _____

Approval :

Instructor Signature: _____ Date : _____

The form should be submitted to the Registrar's Office by the last day of classes for the course.