

**SAMUEL MERRITT COLLEGE**  
Office of the Registrar  
450 30<sup>th</sup> Street, Suite 2802  
Oakland, California 94609  
Telephone: 510.869.1550 Fax: 510.869.6204

## INCOMPLETE GRADE PETITION

**STUDENT COMPLETES THE FOLLOWING:**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Today's date: \_\_\_\_\_

ID Number: \_\_\_\_\_

I request an incomplete grade for the \_\_\_\_\_ (term), \_\_\_\_\_ (year), in the following course:

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DEPT.	COURSE #	SECTION #	COURSE TITLE
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**I understand that my grade in the course will become an F (U for clinical course) if all remaining course work is not satisfactorily completed by the end of the next semester.**

A grade of "I" may be assigned by the faculty member when the student's work is substantially complete yet incomplete due to circumstances beyond the student's control. A petition for an incomplete must be initiated by the student, and approved in writing by the faculty member, prior to the deadline for the submission of the term grades. It is not the responsibility of the faculty member to petition for an incomplete grade, but an instructor may originate an incomplete grade if the student is unable to do so, and has specifically requested an incomplete grade from the instructor.

**INSTRUCTOR COMPLETES THE FOLLOWING:**

Instructor name: \_\_\_\_\_

Instructor signature: \_\_\_\_\_ Today's date: \_\_\_\_\_

The reason for the incomplete grade: \_\_\_\_\_

The work to be completed is: \_\_\_\_\_

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**REGISTRAR'S OFFICE USE ONLY:**

Request reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_

CC: Instructor  
Student  
Student file