



Office of the University Registrar
4700 Research Way
Lakeland, FL 33805-8531
Registrar@floridapoly.edu

Incomplete Grade Agreement

INSTRUCTIONS: This agreement must be completed and signed by both the student and course instructor pursuant to Academic Policy FPU-5.00712AP Incomplete Grade. The completed agreement must be signed by the student and instructor and filed with the University Registrar prior to the applicable semester deadline for reporting final course grades.

TO BE COMPLETED BY THE STUDENT:

Student UID: _____ Date: _____
Last Name: _____ First Name: _____ Middle Initial: _____
Phone: _____ Email: _____@floridapoly.edu
Semester Enrolled: Fall _____ Spring _____ Summer _____ Year: _____
Course Title: _____
Course Prefix: _____ Course Code: _____ Course Section: _____ Course Credits: _____
Instructor Name: _____

TO BE COMPLETED BY COURSE INSTRUCTOR:

- 1. Reason for assigning the incomplete grade (exceptional circumstances providing justification):
2. Description of required work to be completed by the student:
3. Based on the completed coursework to date, the student's current grade in the course is _____. This represents _____% of the required coursework. (Must be at least 75%)
4. Given completed coursework to date, if you were to assign zeros for all currently incomplete work, the student's final grade would be _____.
5. Deadline to complete coursework is _____. **If the student fails to complete these requirements within the established deadline (Not to exceed six (6) months, or graduation, whichever comes first), the final grade will automatically convert to the student's current grade in the course, as designated above.

Student Signature: _____ Date: _____

Instructor of Record Signature: _____ Date: _____



Date received by Registrar's Office: _____ By: _____