California State University
Northridge

REQUEST for an EXTENSION of TIME to REMOVE INCOMPLETE

Instructions:
1. Complete form.
2. Secure Instructor's recommendation.
3. Submit form to EPC Department office.

PRINT Name: _____ File Number: ___-_____
Last, First M.I.

Address: ___ Anticipated Grad. Date: _____
Number Street

_____ _____ _____ _____
City, State ZIP Dept. & Course No. Term/Yr

in which Incomplete was received

University regulations require an Incomplete to be fulfilled within one calendar year immediately following the end of the term In which it was assigned regardless of whether or not a student maintains continuous enrollment. Extension of this time limit is ordinarily not granted; however, a student seeking to extend the limit should document the reasons why he/she believes an extension is justified and the amount of additional time requested. Requests for an extension of time to fulfill an Incomplete should be filed PRIOR to the end of the calendar year which follows the original assignment of the Incomplete. THE MAXIMUM ALLOWABLE EXTENSION IS ONE YEAR.

I seek an extension to fulfill an incomplete for the following reasons:

_____

_____

_____

_____

_____

_____ _____
Student's Signature Date

Instructor's Recommendation:

Approve: ____ Deny: ____ If approved, extend (check one): ___ one semester
___ two semesters

Incomplete must be made up by the end of: _____
Semester / Year

_____ _____
Instructor's Signature Date

A/R 922 10/91 web update