California State University, Northridge A&R

REQUEST FOR EXTENSION OF TIME TO REMOVE INCOMPLETE

NAME: _____ STUDENT ID# _____

ADDRESS: _____ ANTICIPATED GRAD DATE _____

_____ _____ / _____

Dept & Course # in which Incomplete was received — Term/Year

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 REASON(S):

_____

_____

_____

_____

_____

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_____

_____

_____

Student's Signature Date

INSTRUCTOR'S RECOMMENDATION:

APPROVE : _____ DENY : _____

If approved, extend: _____ / _____

1 semester 2 semesters

Incomplete must be made up by the end of: _____ _____

Instructor's Signature Date

INSTRUCTIONS:

1. COMPLETE FORM
2. SECURE INSTRUCTOR'S RECOMMENDATION
3. SUBMIT FORM TO STUDENT INFORMATION CENTER