

California State University, Northridge A&R
REQUEST FOR AN INCOMPLETE
(See current CSUN catalog for the complete policy on assigning incompletes)

PLEASE PRINT:

NAME _____ STUDENT ID# _____

Ticket # _____ Dept & Course # _____ Units _____ Term/Yr _____

I have read the policy in the current CSUN Catalog and request an Incomplete for the following reason:

I understand that this Incomplete must be resolved within one calendar year or the grade will be counted as equivalent to an F.

I understand that if I re-enroll in the course during the calendar year, the original grade will be counted as equivalent to an F.

Student's Signature _____ Date _____

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The above student is doing passing work at this time. The following assignment(s) must be completed to remove this incomplete:

Instructor's Signature _____ Date _____

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The student has completed the assignment(s) required for this class.

The grade to be assigned is : _____ The date this work was submitted: _____

Instructor's Signature _____ Date _____

**This form is to be returned to A & R ONLY after "Incomplete" has been removed.