

UNIVERSITY OF SOUTHERN CALIFORNIA
Incomplete (IN) Completion Form

UNIVERSITY POLICY AS DEFINED IN THE UNIVERSITY CATALOGUE:

Conditions for Removing a Grade of IN (Incomplete)

If a mark of IN is to be assigned as the student's grade, the instructor will specify to the student and to the department all work remaining to be done, the procedures for its completion, the grade in the course to date, and the weight to be assigned to the missing work when computing the final grade. A student may remove the IN by completing only that portion of the required work which was not finished as a result of illness or emergency. Previously graded work may not be repeated for credit. It is not possible to remove an IN by re-registering for the course, even within the designated time.

Time Limit for Removal of an Incomplete:

INs must be removed within one year. If not removed within the specified time limit, marks of IN automatically become marks of IX (expired Incomplete) and compute in the grade point average as 0 points.

To the Instructor: An IN can be assigned only if there is work not completed because of documented illness or some other emergency occurring after the **12th week of the semester**. Arrangements for the IN and IN removal must be initiated by the student and agreed to by you. Indicate below your reasons for assigning a mark of IN as the student's grade.

_____ Documented illness. _____ Emergency circumstances. Provide a brief description. _____

Generally, only the omission of a final examination or the inability to complete end-of-the-term written assignments are acceptable as missing work which qualifies a student to receive an Incomplete. Please enter the following information:

Letter grade for work already completed: _____

Indicate work not completed: Final examination: _____ Other (Specify nature of work): _____

Procedure student should follow to assure timely completion of work: _____

Weight to be assigned to missing work when computing the final grade: _____

To the Student: It is your responsibility to complete the required work as described above and submit it to the instructor within the specified time. You must then request the Grades Department, located in JHH 106, to forward the *Assignment of Final Grade for Completion of IN* form to the instructor.

Student's Name _____ ID# _____ - _____ - _____
(Please print)

Address _____ (_____) _____
(Street) (City) (State) (Phone)

Semester _____ Course Number _____ Class Number _____ Units _____

Instructor's Name _____ Department _____

I understand the requirements for completion of the remaining work in this course.

STUDENT'S SIGNATURE _____ **Date:** _____

INSTRUCTOR'S SIGNATURE _____ **Date:** _____

Upon completion of this form the instructor should retain the original, give a copy to the student and a copy to the Department Grade Coordinator. If the student delays signing the form, please send it back to the department without that signature.