

KANSAS STATE UNIVERSITY

Office of the Registrar

Student Request for Incomplete Grade Extension Form for Incomplete Grades earned Fall 2018 or later

[University Handbook, F83](#)

A grade of Incomplete (I) is expected to be completed by the conclusion of the next regular academic term (fall or spring), or the student's graduation term – whichever is earlier.

STUDENT: In order to request an extension of the incomplete grade (I), please discuss with and secure signatures from your advisor and course instructor. These conversations should occur at least 2 weeks prior to the beginning of final exams. Your instructor will retain the form and forward to the Office of the Registrar for processing.

INSTRUCTOR: If approved, sign and submit completed form to Office of the Registrar, 118 Anderson Hall or via email at registrar@ksu.edu Office of the Registrar, 208 College Center or via email at polytechnicregistrar@ksu.edu
DEADLINE: form must be received no later than 5pm (CST) the Tuesday of final exam week.

Student Name: _____ **WID:** _____ **College:** _____
(AG, AR, AS, BA, ED, EN, HE, TC, GR)

Received an incomplete in:

Course Term: _____ **Course Level:** (UG, GR, DVM) _____

Course Number: _____ **Credits:** _____ **Class Number:** (5-digit) _____

Course Name: _____

Extension Term: _____

To what term should the extension be granted – in what term will the Incomplete expect to be completed

If approved, incomplete will be extended to the end of the next regular term (fall or spring).

Student Signature: _____ **Date:** _____

Required Signatures:

Academic Advisor/Major Professor Signature indicates awareness of the student's situation and intention to request an Incomplete Grade Extension from the course instructor.

Advisor/Major Professor Name: _____
(printed)

Advisor/Major Professor Signature: _____ **Date:** _____

*** If advisor is unavailable or if student currently does not have an assigned advisor, student should secure a signature from the student's primary major academic dean's office. ***

Course Instructor: _____
(printed)

Instructor Signature: _____ **Date:** _____

Or signature of course Department Head if instructor is unavailable