

Date \_\_\_\_\_

Term for Incomplete Grade \_\_\_\_\_

## **Hollins University** ***Incomplete Request Form***

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Student ID \_\_\_\_\_ Class Year \_\_\_\_\_

Course Dept. & Number \_\_\_\_\_ (ex: ART 100)

Title \_\_\_\_\_

Course Reference Number (CRN) \_\_\_\_\_ (ex: 90524)

**Deadline:** \_\_\_\_\_ **(REQUIRED)**

***A grade of F will be assigned if a grade is not submitted for the course by the end of the next full term.***

***Dean's List Eligibility: All coursework for this incomplete must be completed and the grade submitted to the office of the registrar by the 15<sup>th</sup> of the month following the end of the term noted above.***

Course work to be completed (use back of sheet if needed):

Reason for incomplete:

Student's Signature: \_\_\_\_\_

Instructor's Name (please print): \_\_\_\_\_

Instructor's Approval (signature): \_\_\_\_\_

Dean of Academic Services' Approval: \_\_\_\_\_