## Cedarville University Completion Contract for "I" Grade



Student Name:	ID Number:
Course Number:	Course Title:
Semester / Year of Course:	Instructor of Record:
appropriate completion contract with the student. completion requirements, including a completion (email acceptance and evidence is acceptable) any grade should the original faculty member be unal which the class was taken. If the work is not con	iven for work of passing quality that is incomplete at the end of the semester. The instructor will establish an The grade will not be recorded without evidence of the contract. This contract will include a detailed account of late and expectations for completed assignments. Ideally, it should be signed by both the student and instructor be clear enough for another instructor skilled in the subject area to evaluate the work and assign the final course e to administer the contract. The completion date may not extend beyond the end of the semester following the one in pleted by the designated deadline the Incomplete "I" will be changed to the appropriate grade as calculated without alar semester following the semester in which the Incomplete was granted the "I" will be automatically recorded as an calculated as such in the GPA.
Incomplete Contract:  • Brief description of the reason	or the Incomplete:
	and completion date(s) to remove "I" (Attach copy if needed. Also note: The and beyond the end of the semester following the one in which the class was
Student Signature: *	Date:
Instructor Signature:	Date:
* Student accepting contract via email -	attached.
	Copy Distribution:

Original – Instructor

Copy 1 - Dean/Department Chair

Copy 2 - Student