



CLAS Incomplete Grade Electronic Form  
Semester \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_  
G# Last Name First Name GVSU email

Course Title \_\_\_\_\_

Course Number \_\_\_\_\_ Instructor \_\_\_\_\_  
(eg: PED 250) Last Name First Name GVSU email

Reason for Incomplete \_\_\_\_\_

If other, state reason here: \_\_\_\_\_

Last Date of Academic Activity (LDAA) \_\_\_\_\_ **\*Required**

Work required to make-up incomplete. If the deadline for work to be completed is prior to the GVSU policy deadline, please enter the earlier deadline here \*\* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
If work is not completed by deadline the **grade defaults** to: \_\_\_\_\_ **\*Required**

Timely resolution of the Incomplete Grade requires completion of a **Grade Change Form**.

\_\_\_\_\_  
Instructor's Signature

\*Required

\*\*Instructor may designate an earlier date than noted in the catalog

**An Incomplete is given only under extenuating circumstances (serious illness, etc.)**

**It is always the responsibility of the student to see that all work is made up within the allowed period of time.**

Please save this electronic Incomplete Grade form with the title including the students' first and last name, course code, course number and section number (eg: Ima Student ANT 204 05).

Instructor must complete and email this form as listed:

- Unit- Office Coordinator and Unit Head
- Dean's Office –Roxanne Mol-[molr@gvsu.edu](mailto:molr@gvsu.edu)
- Student