



COLLEGE of FINE ARTS

Extension of Incomplete Grade Agreement

To the Registrar:

Student's Name _____ TCU ID# _____

Has received an "I" grade in the following course:

Course prefix & Number _____ Course Title _____

Term _____ Year _____

The Incomplete ("I") grade was assigned for the following reason(s):

The extension has been granted for the following reason(s):

The student must complete all work required by the following date _____

Failure to meet the deadline will result in a grade of "F" entered on the student's permanent record.

Instructor Signature

Date

Department Chair or School Director Signature

Date

Academic Dean Signature

Date

Cc: Department Chair /School Director
Instructor
Student