INCOMPLETE GRADE REPORT

**Completed forms must be returned to the school/college of course enrollment.**

Note: Incomplete grades must be resolved within the time period allowed by the individual school or college of course enrollment, or the maximum of one year (whichever comes first), at which time the grade will be converted to the final grade indicated below, or ‘F’ if no grade is indicated. In CGS and Questrom, grades must be resolved by the end of the following semester.

**Student Information:**

Name:______________________________  BU ID #:________________
Address:_________________________________________________________
Email:______________________________  Cell Phone #:________________
Student’s College of Enrollment:____________  Class Year:____________
Course:__________  Section:__________  Sem/Year:____________
Instructor’s Name:________________________________________________

**To be completed by the instructor:**

Reason for Incomplete Grade:________________________________________

To date, the student has completed ____% with an average of _____ for the portion of work completed.

If the student fails to complete the **missing work** by [date] ________________, the **final grade** to be recorded is __________.

Assignment(s) to be completed:

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<thead>
<tr>
<th>Requirement</th>
<th>Deadline</th>
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I have been in contact with the student regarding the ‘I’ grade for this course.

Instructor Signature:______________________________  Date:________________

**Student Signature:**______________________________  Date:________________