

Boston University Metropolitan College

CONTRACT FOR AN INCOMPLETE GRADE

TO BE COMPLETED BY STUDENT

(Please fill out t	op section, print a	nd give to instruct	tor to complete.)		
Student NameB.U. ID#					
Address					
Phone Number					_
Semester C	Fall O Spring	O Summer	Year		
Course and Sec	tion Number				
Instructor					
he student and This form muthree weeks The student has the work is course. If the work is "Incomplete" **********************************	the instructor hast be signed by hafter the "I" grace has until the last not successfully successfully compared to the app	ave agreed to the poth student and le has been reported within the ropriate grade extrements.	e conditions listed the instructor a pred by the Instructor n of the following this time limit, e time limit, the arned.	ed below. nd filed with the Office of uctor on the Grade Sheet. g semester to complete all the student will automation instructor will submit a gradent w	
	_			This representss academic requirements. Ins	% of the final grade. tructor's Initials:
	fails to complete eported will be an	_	nts within the time	limit prescribed by the colles	ge policy listed above,
Student Signatu	re			Date	
Instructor's Sign	nature			Date	