



“I” GRADE NOTIFICATION FORM

To Be Completed by the Faculty Member

| | | |
|---------------|---------------------------------|-------------|
| Student Name: | Student ID#: | Telephone#: |
| Address: | E-Mail Address: | |
| Course: | Course ID#: | |
| Section#: | Semester and Year Course Taken: | |
| Instructor: | Ext#: | Department: |

Today's date making effective "I" grade given: _____

Reason(s) for Change:

1. What course requirement(s) is the student missing?

a).

b).

2. What must the student do in order to complete the missing course requirements?

3. Student must complete the missing course requirements by:

Anticipated completion date of course requirements: _____

4. Explanation of the student's average without the incomplete work:

5. Value of the made-up work in the final average:

******Copies of this notification should be mailed to the student and submitted to the Department Office prior to leaving the campus at the end of the semester in which the "I" grade is given.******

Instructor's Signature: _____ Date _____

Date received in Department Office: _____