GREAT BAY COMMUNITY COLLEGE - Office of the Registrar

320 Corporate Drive, Portsmouth, NH 03801 5 Milton Road Unit 32, Rochester, NH 03867

INCOMPLETE GRADE CONTRACT

Incomplete Grade Policy

An Incomplete ("I") grade indicates that a student has not completed a major course assignment (usuallya final exam or culminating final assessment) due to extraordinary circumstances, such as serious illness, death in the family, etc. The grade is applied only in those instances where the student has a reasonable chance of passing. It is not used to give extensions of time for students delinquent in meeting course responsibilities.

Course assignments for a grade of Incomplete must be completed by the student through formalarrangement with the instructor no later than:

- The end of the third week in the spring semester for a grade issued in the fall semester
- The end of the third week in the fall semester for a grade issued in the summer term
- Three weeks from the earliest start date of the summer term for a grade issued in the spring semester

The Incomplete Grade Contract must be completed in full by the instructor and also signed/approved by the Instructor, Department Chair, and Student – in that order of signatures, prior to being submitted to the Registrar's Office.

Should the student fail to complete assignments within the designated period, the final grade will be changed to "F." Exceptions to the above deadlines may be made by the Vice President of Academic Affairs. "I" grades will not be included in the computation of grade point average. An "I" grade may affect a student's financial aid. Students should contact the Financial Aid Office on their campus for further information.

The completed form will be maintained in the Registrar's Office at the College until the Student has completed the requirements listed below and a Change of Grade Form is submitted to the Registrar bythe Instructor. The Incomplete must be satisfied by the end of the third week of the subsequent semester or the grade defaults to an "F."

Semester:	Year:	Major:	
Student Name:		Student ID:	
Instructor:	Course Title:		CRN:
Requirements to be completed:			
Completion due date:			
Instructor Signature		Da	te
Department Chair Signature		Da	te
Student Signature			te