



CONTRACT FOR INCOMPLETE

Student Name \_\_\_\_\_ WT ID \_\_\_\_\_

Date of this Request \_\_\_\_\_ Semester and Year \_\_\_\_\_

Course \_\_\_\_\_  
(Dept) (Number) (Section) (Hours)

Course Title \_\_\_\_\_

Instructor \_\_\_\_\_

Reason for Request \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Deadline date for Contract (should not exceed 1 year) (mm/dd/yy) \_\_\_\_\_

Conditions for making up Incomplete \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contract requested by: \_\_\_\_\_  
(Student's Signature) (Date)

Contract agreed to by: \_\_\_\_\_  
(Instructor's Signature) (Date)

Department Head: \_\_\_\_\_  
(Department Head Signature) (Date)

If the conditions for making up an incomplete are not met by the deadline date, the course grade will be changed to an **F** by the Registrar's Office. If the work is completed, the instructor will initiate the change of grade at the Office of the Registrar. The student may not drop the course and may not receive a grade of **X**. Students who are given an Incomplete **MUST NOT** re-enroll in the class.

Original: Registrar's Office

Copy: Faculty should photocopy to retain for files and copy to send to student