

**NAPA VALLEY COLLEGE
INCOMPLETE GRADE AGREEMENT**

Student's name _____ SSN# _____ - _____ - _____

Registration Number			

Course Name	No.

Units

Instructor's name: _____ Semester & year: _____

Work to be completed (Be specific; use additional sheet if necessary): _____

All work to be completed by: _____ *

mm/dd/yy

If this is not completed, a grade of _____ will be assigned.

The final date of completion as noted above shall be a joint decision of the instructor and student, but shall in no case exceed a time of ONE SEMESTER beyond the end of the semester in which the work was originally to have been completed. *Should the incomplete work not be presented to the instructor by the final date noted above, the instructor will assign a grade as earned up to the time of the deadline date, taking into account the uncompleted course requirements. This grade is listed above. However, ONCE AN INCOMPLETE AGREEMENT HAS BEEN REACHED BETWEEN THE INSTRUCTOR & STUDENTS & FILED WITH THE RECORDS OFFICE, THE GRADE OF "W" WILL NO LONGER BE AN OPTION AVAILABLE TO THE INSTRUCTOR OR STUDENT IN THAT COURSE. RETURN THIS COMPLETED FORM WITH ROSTER

Student's Signature _____ Instructor's Signature _____

2/15/95 A&R White-Admissions Office

Yellow-Instructor

Pink-Student

RETURN THIS COMPLETED FORM WITH GRADE ROSTER

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