Cheyney University of Pennsylvania Cheyney Pennsylvania

Report on Incomplete and IP grades ("I, IP") Grades

(This completed form must be submitted to the Office of the Registrar for "I" or "IP" Grade input. Upon completion of the assignment the "Change of Grade Form" must be processed).

Prepared and submitted by:		Date		
Instructor	r (Please Print)			
Name of Student		ID #	D.O.B	
Address			Phone	
Course Title	Course #	Section	Semester	Year
A. Rationale for "I", or "IP" Grade _				
 B. Please attach course syllabus and has student earned thus far? C. Please attach missing test(s), example. 		•		
Student's Signature (Optional)	Date	Instructor's Signatu	ıre	Date
Department Chair's Signature	Date	Dean's Signature		Date
Registrar's Office Processor	Date			
Note: An "I" grade will automatically completed within the first seven w remains until course is completed.			1 0	
4 - Part Form Distribution: Original =	Registrar's Off	fice for documentation.		

Copies = Student, Department Chairperson, Provost.

(Distribution by the Office of the Registrar)

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