



ITU

International Technological University

2711 North First Street - San Jose, CA 95134

Phone (888) 488-4968

www.itu.edu

Incomplete Grade Contract

STUDENT INFORMATION

First Name

Middle Name (optional)

Last Name

Student ID Number

Email Address

COURSE INFORMATION

Course Number (e.g., GRN 900-1)

Course Title (e.g., Internship)

Instructor Name

Instructor Email Address

CONTRACT INFORMATION

Please describe the following in detail:

Reason(s) for requesting the incomplete grade: _____

Missing work required to complete the course: _____

Arrangement for making up the work: _____

Deadline to complete the required work (no later than the end of the next trimester): _____

By signing the below line, I (the Student) agree to ITU's Incomplete Grade Policy, in addition to the terms set forth by my professor as listed above.

Student's Signature: _____ *Date:* _____

Instructor's Signature: _____ *Date:* _____

Registrar's Signature: _____ *Date:* _____