



# Contract for Completion of Incomplete (“I”) Grade

Name: \_\_\_\_\_ OSU ID #: \_\_\_\_\_  
*Last First Middle*

\_\_\_\_\_

Course Prefix and Number	CRN	Course Title	Credits
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\_\_\_\_\_

Instructor	Term Taken
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\_\_\_\_\_

Date of Contract	Date course work to be completed by or default grade becomes earned grade
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**Remaining work to be completed (Please attach syllabus & highlight items noted below):**

Work	pt. value/total possible or	% value of total pts.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other comments and/or resources needed from instructor by specified date:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Student’s Default Grade:**

If remaining work to be completed is NOT turned in, the grade the student would earn: \_\_\_\_\_

We understand that unless the student completes the above listed course work by the completion date stated, the grade for this class will revert from an “I” to the Student’s Default Grade noted above. It is the responsibility of the student to see that work is completed and submitted by the agreed upon date.

Student \_\_\_\_\_ Date \_\_\_\_\_

Instructor \_\_\_\_\_ Date \_\_\_\_\_

**Faculty, please provide a copy of this agreement to:**

- Department Head
- Student’s Academic Advising Office
- Student
- Faculty member of record