

Office of the Registrar 671 Winyah Dr. Orlando, FL 32803 Ph. 407-303-1785 | Fax 407-303-9755

- Instructors must submit this form to the Office of the Registrar.
- An incomplete grade will not be processed without a signed form.
- √ There is a \$15 student charge for each incomplete granted.
- An incomplete grade must be removed by the deadline. If it is not removed, the grade may be changed to an "F".

Student Section: Please complete in blue or black ink					
Legal Last Name	Legal First Name	Student ID	Program/Inte	erest	
Phone Number AHU Email Address		Instructor's	Instructor's Name		
		_		Fall _ Spring	
Course Number and Section  Reason for Request (Please attack)	Course Name h any additional information)	Credits	School Year	Summer 🗌	
——————————————————————————————————————	- uny additional myormation,				
Student Signature (required):					
		-			
Instructor Section					
<ul> <li>✓ Student has been actively attending and is up-to-date-with current assign</li> <li>✓ Student is currently passing the course:</li> </ul>			_	□ No	
Reason for Request				_	
✓ Is this an approved or extenuating circumstance?(If yes, please explain below) ☐ Yes ☐ No					
Canvas access and deadline information  ✓ Remaining assignment(s) will be completed in Canvas (If yes, complete date range):  ☐ Yes ☐ No					
Deadline and Final Grade Information					
✓ The student must compete the work by (MM/DD/YY – No later than the end of the following trimester):					
✓ If work is not completed by deadline, assign the following grade to student's permanent record:					
Instructor Comments					
		☐ Approv	ved De	nied	
		Signature: _			
	 Date:	Date:			
Department Chair Commen	ts				
		Approv	ved 🗌 De	enied	
		Signature: _	Signature:		
			Date:		
Office of the Registrar Signa	ture	<u> </u>			
<u> </u>					
Signature:		Date:			