St. Lawrence University
Office of the Registrar

Extension for an Incomplete (‘E’) Grade Previously Given

Instructor’s Name _______________________________________________________

Student Name ___________________________ Student ID # ___________

Term and Year ___________________ Course ID__________________

Course Title ___________________________________________________________

Instructor’s HANDWRITTEN Signature: _____________________________________

Date: ______________________

Extension

The Department Chair may request an extension for completing the course work and submitting the final grade. This extension may be no longer than to the end of the current semester. “Further extension must be requested of the dean of academic affairs and is unusual since the passage of time often brings changes in instructor and course content.”

Extend Deadline To: _________________ (cannot be longer than end of course term)

Chair’s Name: _________________________________________________________

Chair’s HANDWRITTEN Signature: _________________________________________

Dean’s HANDWRITTEN Signature: _____________________________ (if beyond end of courses registered term)

Date: _________________________

Rev 3/2/11