

**MACALESTER COLLEGE  
REGISTRAR'S OFFICE**

1600 Grand Avenue, St. Paul, MN 55105-1899  
fax: 651-696-6600 ph: 651-696-6200 www.macalester.edu/registrar  
registrar@macalester.edu

This form due to Registrar's Office on or before **the last day of classes.**

**Course Completion Agreement Form**

*POLICY: Students are expected to complete the work in each course on schedule. Under unusual circumstances, an instructor may allow a student an additional specified period of time to complete the course, as listed in the academic calendar.*

*INSTRUCTIONS: The student and instructor must both sign this form. This completed form must accompany any submission of grade of I (incomplete) to the Registrar.*

*NOTICE: Students on Strict Probation may **not** receive a grade of I (incomplete). Be advised that multiple incompletes will cause the student's record to be reviewed by the Academic Standing Committee. If this applies to you, consult with the Director of Academic Programs.*

Student: \_\_\_\_\_ ID#: \_\_\_\_\_

Dept, Number, Section: \_\_\_\_\_ Course Title: \_\_\_\_\_

Faculty Name: \_\_\_\_\_

Description of work to be completed in order for a final grade to be assigned:

Due Date for completion of work: \_\_\_\_\_. This deadline must be on or before the date listed in the academic calendar.

Grade to be assigned if work is not completed: \_\_\_\_\_. If a final grade is not submitted within one week of the due date you have written above, the grade of NC or the grade indicated here will be recorded for the course.

X \_\_\_\_\_  
Student Signature Date

X \_\_\_\_\_  
Faculty Signature Date

Date form rec'd \_\_\_\_\_