



Contract for Course Extension in:

_____ (course number and title)

I, _____ (CU ID number _____),
agree to
(Student Name)

the following stipulations with respect to my course extension:

1. I understand that I will be given an interim grade of “I” (Incomplete) until I complete all course assignments, examinations and/or other requirements.
2. I am being granted a course extension for the following reason:
3. I will take the remaining examinations and complete any remaining assignments in the course by the dates identified below: *(Complete all that apply.)*
 - a. Examination #1: Exam Date: _____
 - b. Examination #2: Exam Date: _____
 - c. Examination #3: Exam Date: _____
 - d. Examination #4: Exam Date: _____
 - e. Course assignment: _____ Completion Date: _____
 - f. Course assignment: _____ Completion Date: _____
 - g. Course assignment: _____ Completion Date: _____
 - h. Course assignment: _____ Completion Date: _____
4. I understand that **all** work for the course must be completed and in the hands of the instructor **not later than:** _____. I also understand that after this date, failure to comply with my planned completion of the course will result in a final grade of _____ in the course, unless an exception **is granted in writing** by the instructor of record.

Student Signature _____ Date _____
(Signature)

Faculty Approval _____ Date _____
(Signature)

xc: Faculty Advisor
Associate Dean for Academic Affairs, SPAHP
Student File