



Form "1"
FACULTY OF ARTS AND SCIENCES
Request for Make up of Incomplete Work

To: Office of the Dean

From:
 Name of Course Instructor

Student's Full Name: Student's ID number:

Student's Class & Major: Student's Box number:

The above student has my permission to delay the completion of the work required in
 (Department) (Course Number)
 which the student registered for during: Fall Spring Summer
 of the academic year

Time and date of missed final exam Course Grade Reported on SIS

Reason(s) for the incomplete work is/are as follows: *

Approval of your Office is hereby requested to allow the student to complete the missed part of
 the course within four weeks after the beginning of next regular semester.

Thank you.

Date:
 Signature of Course Instructor

* Give a brief assessment of the student's performance in the course and attach available documents.

N.B. Deadline for submission of this form is two weeks from the date of the scheduled final exam of the course in question. Late requests must be justified.

(The space below is reserved for response by the Office of the Dean)

To: Course Instructor Date:

From: Office of the Dean

The above request is: Approved Declined

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 Authorized Signature
 A/ Chairman, Student Academic Affairs Committee

cc: Office of the Dean
 Chairman or Director of Academic Unit
 Academic Adviser
 Student