

Clarendon College

Office of the Dean of Instruction

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Clarendon, Texas 79226

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INCOMPLETE COURSE CONTRACT

Date: _____

Student Name: _____ SSN: _____

Instructor: _____

Incomplete Course: _____ Semester: _____

Course Title: _____

Reason for Incomplete: *(Justifiable reasons include but are not limited to major illness or death in the family)*

Description of Coursework to be completed: *(Add attachments as needed)*

All Coursework must be completed by this date: _____

(Not to exceed the end of the next long semester)

Instructor Signature

Date

Student Signature

Date

Copies of this contract go to the instructor and the student. The original is to be filed with the Dean of Instruction.

Failure to complete work by the date listed will result in a student grade of "F" for the course(s) listed. Incomplete grades result in student not being eligible for financial aid the following semester.