



SIMMONS UNIVERSITY
 Office of the Registrar
 300 The Fenway, Boston, MA 02115
 Tel 617.521.2111 Fax 617.521.3144

PETITION FOR AN INCOMPLETE GRADE

For Graduate Students in the following programs: Behavior Analysis, Children's Literature, Education, Gender & Cultural Studies, Health Professions Education, History, Library and Information Science, Nutrition, Physical Therapy, and Public Policy. For other programs, please consult your Student Handbook or Program Director.

Student Information:

Student Name: _____ Simmons ID #: _____

Program: _____

Course Information:

Course Code: _____ Title: _____

Semester: _____ Academic Year: _____

Reason for Request:

Outline of Course Work to be Completed:

Proposed Date of Completion: _____

Date that the final grade will be submitted to the Office of the Registrar: _____

Student's Signature: _____ Date: _____

Instructor's Signature: _____ Date: _____

Program Director's Signature: _____ Date: _____

Dean's Signature: _____ Date: _____

Approved Denied

Completed forms should be submitted to the Office of the Registrar at grades@simmons.edu.

**Grades not submitted by the above deadline will be automatically converted to an "F."*

OFFICE USE ONLY Processed by: _____ Date: _____