

Office of The University Registrar 72 Fifth Avenue New York, NY 10011 Tel 212.229.5620 Fax 212.229.5648

PETITION FOR EXTENSION OF TIME FOR REMOVAL OF A GRADE OF INCOMPLETE

GRADUATE STUDENTS ONLY

This form should be used only to request an extension of the deadline for the removal of an incomplete grade. Instructors should submit the original grade in MyNewSchool/ALVIN or use a change of grade form to change a grade. Please note: The maximum time allowed for an extension is 6 (six) months. Students may request up to 2 (two) extensions for a course. If coursework is not completed by the approved date specified on this form, a permanent grade of incomplete will be assigned.

CHECK ONE:	☐ FIRST EXTENSION	☐ FINAL EXTENSION
STUDENT NAME:	(PLEASE PRINT CLEARLY)	ID:
COURSE MASTER NUMBE	R:	
COURSE TITLE:		
INSTRUCTOR NAME:		
TERM AND YEAR COURSE	WAS TAKEN:	
STUDENT SIGNATURE:		DATE:
Please extend the deadline for the work to be completed and the grade submitted to the Registrar's		
Office to:	AY/YEAR	
INSTRUCTOR SIGNATURE:		DATE:
CHAIRPERSON SIGNATUR	Ξ:	DATE:
Additional approval require	ed for Final Extension only:	
DIRECTOR OF ACADEMIC	AFFAIRS:	DATE:
REGISTRAR'S OFFICE USE ONLY:		
☐ ENTERED:	DATE	