



Faculty of Health Sciences
APPLICATION FOR INCOMPLETE

The designation of 'I' is awarded only in case of illness or other extenuating circumstances beyond the control of the student, which make it impossible to complete the required work by the close of a semester. The 'I' designation is awarded only on application to and approval of both the instructor and the Dean and such application is not entertained until the last two weeks of classes. A student who does not complete outstanding work by the assigned deadline will receive an 'F' in the course.

NOTE: The student must complete all fields in Step 1 before having the instructor and Academic Advisor sign the form (attach supporting documentation, if applicable).

Step 1 – To be completed by the student

Student's Name: _____ ID Number: _____ U of L email: _____

Course Number & Section: _____ Term: _____

Reason for Request (include details on supporting documentation, if applicable):

Step 2 – To be completed by the course instructor

Instructor's Name: _____

Remaining course requirements

% of overall grade

1. _____
2. _____
3. _____

Recommend Incomplete: ☐ Yes ☐ No

Proposed Deadline for Completion of course work (dd/mm/yy): _____

Additional information the instructor would like to provide:

Instructor's Signature: _____ Date: _____

Step 3 – To be completed by the Health Sciences Advisor:

Graduate Programs - Tammy Rogness, M4047
BN, BNAD, and NPP - Sherry Hogeweide, M3076
All other programs - Janelle Fyfe, Markin Hall, M3074

Incomplete Approved: ☐ Yes ☐ No

Date: _____

Comments: _____

Dean's Office Signature: _____
