



# UCIRVINE | EXTENSION

## Incomplete grade assignment agreement

Student's name:	Today's date:
ID number:	Instructor's name:
Course number:	Quarter offered:
Course name:	

In order to complete the requirements for the class noted above, the following assignments must be completed and sent to the instructor by the agreed upon date of \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_

Signature of student: \_\_\_\_\_

Signature of instructor: \_\_\_\_\_

**PLEASE NOTE: A copy of this signed agreement needs to be given to the planning unit director.**