

UNIVERSITY OF PITTSBURGH
School of Health & Rehabilitation Sciences
COMPLETION AGREEMENT OF INCOMPLETE CREDITS FOR A GRADUATE
STUDENT

Name: _____

Pitt Email: _____

PeopleSoft ID (7 digits): _____

Class Subject & Number: _____ **Catalog (section) Number:** _____

Credits: _____ **Term Taken:** _____

Instructor: _____

Expected Date of Completion: _____

(Must be completed by no later than the end of the next consecutive semester- Summer term included)

Objectives for Completion: (Attach additional pages if more space is required)

When signing this form do not use the script pen. Click on the signature line to use a digital signature or send it through DocuSign to those that are required to sign.

Student's Signature Date

Instructor's Signature Date

Advisor's Signature Date

Please make a copy for everyone that has signed. A completed and signed form will need to be sent to Kellie Beach at kbeach@pitt.edu, no later than the add/drop deadline for the term following the term the I grade was given.

These two conditions will cause a student to receive a failing grade from the instructor: (1) not submitting the form by the deadline stated above. (2) the student fails to complete the work by the expected completion date.

Student Services use only

Grade Change Completed On: _____