



3115 W. Ashby Place or P.O. Box 28185
 San Antonio, Texas 78228-5104 U.S.A.
 Phone: (210) 732-2156 ext. 7102
 Fax: (210) 732-9072
 Email: register@maccsa.org; www.maccsa.org

Incomplete Grade Application

Student Name: _____ Major _____ Semester & Year _____

MACC Student ID Number _____ Cell Number ____-____-____ Email Address _____

Incomplete Grades: Extensions for completion of course requirements at the end of the semester may be requested from the Registrar’s Office, with the approval of the instructor, for emergency reasons unforeseen at the beginning of the semester. When extensions are approved, the duration will be appropriate to the situation, but the maximum extension considered will not exceed a four-week period from the end of the semester. If more time is needed, the student must make a request in writing to the Academic Dean. (MACC Catalog, May ‘09)

Course Letters	Course Numbers	Course Title	Professor’s Name	Semester Hours
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I am applying for an extension to complete the course requirements for the above course. The duration of the extension that I have negotiated with the instructor is _____.

Student’s Signature	Date	Instructor’s Signature	Date	Registrar’s Signature	Date
6/30/09					



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