



Extension/Incomplete Grade Request

3000 W. MacArthur Blvd. | Logos Building, Suite 220
Santa Ana, CA | 92704

Student Name: _____ Date: _____

Address: _____

“I request an Incomplete for the following course”:

Course ID: _____ Course Name: _____

Reason for Request:

An “Incomplete” grade status is not granted automatically. It is the student’s responsibility to complete this request that are deemed an emergency circumstance, such as prolonged serious illness or death in the family, will be granted. If an Incomplete grade is approved, it will automatically become an “F” (failure) after sixty (60) days from the end of the course if arrangements are not made for an extension prior to this time. Extension may be granted only in cases of just cause. Upon submission of the written extension request, the student agrees to pay the \$50 extension fee as well as a 1/2 grade reduction of the final grade for the course. The Seminary must also approve this extension.

Student Signature: _____

VES Office Use Only:

Approved Denied: Reason: _____

Paid Fee: Yes No

Registrar Signature: _____

Academic Dean Signature: _____

New Completion Date: _____