Graduate Student Petition to Extend Deadline to Complete an I/U Grade

- When an Interim I/U grade has been assigned, the default "U" grade shall become the grade of record if the "I/U" is not replaced by a permanent grade within **twelve (12) months** after the close of the term for which the "I/U" is assigned according to the chart below. The instructor may set an earlier deadline for completion of the course requirements. If an earlier date for completion is set, the instructor shall inform the student in writing.
- A student may not re-register for any course in which the student has an interim "I/U" grade.

<table>
<thead>
<tr>
<th>Courses Taken In Any Given Year During</th>
<th>Deadline for Change of Grade or Petition for Extension of Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summer Semester</td>
<td>Aug. 31st of the following year</td>
</tr>
<tr>
<td>Fall Semester</td>
<td>Dec. 31st of the following year</td>
</tr>
<tr>
<td>Spring Semester</td>
<td>May 31st of the following year</td>
</tr>
</tbody>
</table>

Last Name _____________________________________ First Name _________________________________

UB Person Number _____________ -- ______________ E-mail ____________________________________

Matriculating Dept. __________________________ Master’s _______ Ph.D. _______ Au.D. or DNP _______

I am requesting an extension of the deadline to change I/U grade for the following course until:

________________________________________________________ (maximum 4 months beyond initial deadline for change of grade)

JUSTIFICATION: ____________________________________________________________________________

COURSE INFORMATION:

Course Abbreviation and Number (e.g. MAE 601): ______________

Semester taken: □ Fall  □ Spring  □ Summer  ___________ (year)

Name of Course Instructor: __________________________________________ (Please print)

Required Approvals:

Student ___________________________________________ Date___________

Course Instructor ___________________________________________ Date___________

Dept. Chair or Director of Grad. Studies ___________________________ Date___________

SUBMIT THIS FORM with required approvals to the OFFICE OF THE REGISTRAR for processing:

University at Buffalo
Registrar at 1Capen
Capen Hall
Buffalo, NY 14260-0001
UBREG@buffalo.edu

FINAL ACTION TAKEN: _____ Approved   _____ Denied

Office of the Registrar ___________________________________________ Date___________

8/11/17