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 1Cape
Capen Hall
Buffalo, NY 14260-0001
UBREG@buffalo.edu

**FINAL ACTION TAKEN:** _____ Approved  _____ Denied

Office of the Registrar ________________________________________________ Date __________

8/11/17