

**GARFIELD HIGH SCHOOL**  
**REQUEST TO TAKE COURSE PASS/NO GRADE (P/N)**  
**and INCOMPLETE (I)**

- The **P** grade indicates passing, while an **N** indicates no grade/credit in a course.
- **P** grades must be requested in writing to the Principal during the first 5 weeks of the semester.
- Only one **P** grade is allowed per semester.

- The **I** grade indicates an Incomplete grade in a course due to extenuating circumstances.
- An **I** grade will display as an **E** on the Academic History/Transcript until the completed grade is entered.
- **I** grades must be requested in writing by the teacher to the Principal before the due date for semester grades (5 work days after the end of the semester). It must include the rationale (extenuating circumstances) and an outline of what work needs to be completed by the student to receive the final grade.
- The rationale and outline must also be submitted by the teacher via **email** to the Principal (attach a copy of the email to this form).
- An Incomplete (I) grade must be completed by the 5<sup>th</sup> week of the following semester and the completed Grade Change Form turned into the Principal by the 6<sup>th</sup> week of that same semester.

**Date of Request:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

**Student's Name:** \_\_\_\_\_  
(please PRINT) (Last) (First) (MI)

**Graduation Year:** 20 \_\_\_\_\_ **End of Grading Period:** \_\_\_\_\_  
(month/year)

**Course Title:** \_\_\_\_\_ **Course #:** \_\_\_\_\_ **Section #:** \_\_\_\_\_

**Teacher's Name:** \_\_\_\_\_  
(please PRINT)

**Student's Signature:** \_\_\_\_\_

**Parent/Guardian's Signature:** \_\_\_\_\_

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**Teacher's Approval:**

⇒ \_\_\_\_\_  
Signature Date

**\*\*\*\*\* PLEASE RETURN THIS FORM TO THE PRINCIPAL \*\*\*\*\***

**Approved OR Denied by:** \_\_\_\_\_  
CIRCLE ONE Administrator Date

**Comments:**

\_\_\_\_\_  
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