Yale Divinity School

REQUEST FOR A DEAN'S EXTENSION

This form should be used only for extensions requested beyond the "last day for faculty to accept late work" as specified in the Divinity School Academic Calendar. Per the YDS Bulletin, "an Incomplete grade will automatically be recorded as Fail (F) or No Credit (NC), unless a petition for a dean's extension is filed by the designated date."

SID #:		Date:			
Name:					_
Expected Degree and	Year of Gradua	ntion:			_
Course Number:			CRN #:		-
Course Title:					- -
I,Instructor's name	will acc	cept the work, i	if approved by	the Academic Dean	
			_		
Signature of Instructor:					
	BY TH	E ACADEMIC	C DEAN		
DATE TO WHICH YOU REQ					
Give a detailed explanation of the re provisionally agreed with your instru				_	ive
Describe, by assignment type, the w plan for completion (if multiple assi	•	•			•
Have you applied for an extension If yes, please list the course(s) and o	date(s) of previou		No		
Dean's Action: Approve	ed: Y N	Initials:	1	Oate:	