San Diego Unified School District
Course Competency Completion Form

Directions: This form, or a similar site-developed form, is to be completed by a teacher who has awarded an “I” (Incomplete) or “IP” (In Progress) semester grade. The “IP” grade is assigned to provide the student with additional time to meet course proficiencies, which have not been satisfactorily completed at the end of the grading period. At the time of awarding the “I” or “IP,” the teacher must inform the parents of the student regarding a possible failing grade if the designated course proficiencies are not successfully completed. A student has up to 6 weeks following the end of the term to complete the course competencies as prescribed by the teacher awarding the “I.” A student has up to 12 weeks following the end of the term to complete the course competencies as prescribed by the teacher awarding the “IP.” The original teacher will assign a final grade. In the absence of the original teacher, a principal/administrator will assign the grade. An Official Form to Change “I” or “IP” Grade will be submitted to the school registrar or site tech when the final grade has been determined. The site administrator must provide final approval of the grade change.

School of Attendance: ____________________________  School Year: __________

Student Name: ____________________________  ID __________  Grade: _______  Class of: _______

Course Name and Number: ____________________________  Original Grade Awarded: “I” or “IP”

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Competency #1:

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Completed: Teacher Initials _______  Percentage of Successful Completion_______

Competency #2:

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Completed: Teacher Initials _______  Percentage of Successful Completion_______

Competency #3:

_______________________________________________________________________________________________

_______________________________________________________________________________________________

_______________________________________________________________________________________________

Completed: Teacher Initials _______  Percentage of Successful Completion_______
Competency #4:_______________________________________________________________________________________________
____________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
__________________________________________

Completed: Teacher Initials _______ Percentage of Successful Completion_______

Competency #5:____________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Completed: Teacher Initials _______ Percentage of Successful Completion_______

Competency #6:________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Completed: Teacher Initials _______ Percentage of Successful Completion_______

Attach additional sheets as necessary.

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Student Name:________________________________  ID________________  Grade:_______  Class of:_______

Course Name:________________________________________  Course Number:________________________

Teacher Name:________________________  Signature:________________________________________

Date Submitted to Original Teacher:__________

Original Teacher Name:________________________  Signature:________________________

Grade Awarded Upon Completion of Work or Course Competencies:   A   B   C   D   F

Note:  The final grade must be submitted to the site tech or registrar by using the Official Form to Change “I” or “IP” Grade, which requires principal approval. This Course Competency Completion Form is an official document that must be stored in the student’s cum folder, once the changed grade has been submitted and completed. If the student does not complete course competencies at the end of the allowed timeframe, the teacher shall issue a grade to replace the “I” or “IP.” If the teacher does not issue a passing grade by the end of the allowed timeframe, an “F” grade will be issued.