

Diman Regional Vocational Technical High School

Fall River – Somerset – Swansea – Westport

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INCOMPLETE GRADE NOTIFICATION FORM

Student Name _____ ID# _____

Year of Graduation _____ Shop _____

Course: _____

Teacher: _____

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**You are receiving a grade of INCOMPLETE (I) in my
course for the _____ Trimester of this school year.**

You will have until the close of school on _____ to
make up the work that resulted in the grade of “I”. If you fail to make up the work
by the close of school on the above date, you will receive a **failing grade** for the
Trimester.

Please see me immediately to arrange for your makeup work.

Student Signature _____

TEACHERS: Student is to be handed this form to be signed. A copy of this form is to be turned
in to your Coordinator—Mr. Aubin (Vocational) or Mrs. Letendre (Academic)