

North Georgia RESA
Gifted Endorsement Program
Incomplete Course Agreement

Candidate's Name: _____ Date: _____

Gifted Endorsement Course: _____

I understand that I have not satisfactorily completed course requirements as indicated below. I also understand that I must correct this/these deficiencies within the timeframe indicated in order to receive credit for this course. It is my responsibility to contact RESA and arrange to complete the requirement(s).

Check items that apply:

_____ Class absence(s) on: _____

_____ Date(s) of make-up class opportunities: _____

_____ Missing Assignment(s): _____

_____ Deadline for submission: _____

_____ Inadequate Assignment(s): _____

_____ Deadline for re-submission: _____

Signature: _____ Date: _____

Instructor's Signature: _____ Date: _____

PLU Director's Signature: _____ Date: _____