

INCOMPLETE COURSE (I)

CCAS Office of Graduate Studies
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Arts &
Sciences

The symbol *I* (Incomplete) indicates that a satisfactory explanation has been given to the instructor for the student's inability to complete the required coursework during the semester of enrollment. At the option of the instructor, the symbol *I* may be recorded if a student, for reasons beyond the student's control, is unable to complete the work of the course, and if the instructor is informed of, and approves, such reasons before the date when grades must be reported. The symbol *I* cannot be changed by re-registering for the course at GWU or by taking its equivalent elsewhere.

Name: _____ GWid:

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Last Name First Name M.I.

Department: _____ Degree: _____ Email: _____

TERM	CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE	INSTRUCTOR NAME

The validity of this contract is contingent upon both boxes being checked "Yes"

Is the student receiving passing grades in the course? Yes No

Has a copy of this contract been kept on file at the student's department? Yes No

What work must the student do to complete the course? Identify, specifically, the type of work product (e.g. paper, exam) and the number of assignments.

How will the student's grade be computed? Identify all elements in the final grade, including percentages assigned to each and grades for completed elements. (Please attach a copy of the course syllabus and other materials necessary to compute the final grade in your absence.)

All work to be completed by*:

**The default time to resolve an Incomplete grade is one semester. This period can be longer or shorter (up to one calendar year) at the discretion of the instructor. If coursework is not completed within the specified time, the Incomplete will be converted to a grade of F.*

I have reviewed the conditions above and as stated in the current *University Bulletin* by which I will be assigned an Incomplete and understand what I must do to meet these conditions.

Student Signature: _____ Date: _____

Departmental Approval(s)

Instructor Approval: _____ Date: _____

DGS Approval: _____ Date: _____