Incomplete Grade Form
(To be completed by Student)

Student Name __________________________________ myWSU ID# ____________________

Course: SCWK ___________ CRN # ___________ Semester ___________ Year: 20 ______

Instructor ______________________ Last Date of Attendance/Participation ____________

1. Briefly provide a rationale for your request for the incomplete.

2. List/describe the work that needs to be completed for the course requirements.

I understand that instructors do not automatically grant nor are they obligated to give an incomplete in a course. There must be extenuating circumstances that lead to the decision to request an incomplete and the opportunity to complete this course. **It is my responsibility as the student** to ensure that I complete all course work in agreement with the instructor.

I understand that I will not be able to progress into the practicum until the incomplete grade is resolved.

**BSW ONLY:** I understand that, according to university policy as stated in the *WSU Undergraduate Catalog*, the incomplete will automatically be changed to an “F” if I have not completed the course requirements by the end of the next semester in which I enroll (excluding the summer term).

**MSW ONLY:** I understand that, according to the Graduate School policy as stated in the *WSU Graduate Catalog*, if I have not completed the course requirements by the end of the second semester following the assignment of the incomplete (excluding the summer term), I will have to retake the course to receive credit.

Student’s signature __________________________________________ Date ______________________

Instructor’s Approval
(To be completed by instructor)

Current grade in the course ___________ Final grade if missing work is **not** completed ___________

Coursework to be completed by this date ______________________

Instructor’s signature ______________________________________ Date ______________________