



INCOMPLETE COURSE GRADE (I)

Graduate Student Services
1957 E Street, NW, Suite 603
Phone: 202-994-3788 Email: esiagss@gwu.edu

The symbol I (Incomplete) indicates a satisfactory explanation has been given to the instructor for the student's inability to complete the required course work during the semester of enrollment. At the discretion 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. Once this contract is complete, submit it to the Elliott School Graduate Student Services office.

First and Last Name:

GWID:

GW Email:

SEM/YEAR	CRN	SUBJECT	COURSE NUMBER	SECTION	CREDITS	TITLE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Instructor Name (First, Last): _____

Instructor Email: _____

The section below should be completed by the instructor of the course. The validity of this form is contingent upon all boxes below being checked YES.

Has the student's prior performance and class attendance in the course been satisfactory up until this time? YES NO

Has the student presented adequate reasons/documentation for the inability to complete remaining assignments on time? YES NO

Has the student completed the majority of the coursework required for this class? YES NO

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

All work must be completed by:
(may not exceed one calendar year)

Once an Incomplete is given, students cannot re-enroll in the course or "sit-in" on the course in a future semester.

I have reviewed the conditions above and in the *University Bulletin* regarding incomplete grades and understand I will be assigned an Incomplete grade. I understand what I must do to complete the course and how this Incomplete may affect my satisfactory academic progress in terms of any federal financial aid I may receive.

Student Signature: _____

Date:

Instructor Signature: _____

Date:

Academic Advisor Signature: _____

Date: