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 ration	nale for your request for the	incomplete.	
2. List/describe the work	that needs to be completed	for the course requirements.	
There must be extenuating	circumstances that lead to this my responsibility as the		we an incomplete in a course. omplete and the opportunity uplete all course work in
I understand that I will not	be able to progress into the	practicum until the incomple	ete grade is resolved.
incomplete will automatica		I have not completed the cou	Undergraduate Catalog, the urse requirements by the end

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