

Tulane School of Social Work

CONTRACT REGARDING INCOMPLETE WORK

Course No. _____ Course Name _____

I understand that I will receive an **Incomplete** for my work in this course since I have not yet met all of its requirements

I understand the School’s policy statement regarding Incompletes:

- 1. It is the responsibility of the Student to contact the instructor when incomplete work in a course is anticipated, or occurs, to reach an agreement as to when the assignment will be completed. The time may not exceed six weeks from the last day of class in which the “I” occurred. This agreement should be confirmed **IN WRITING** by the instructor and signed both by the instructor and the student, with a copy for the student’s file.
- 2. Once the extension of time has been agreed upon **ALL** further responsibility for meeting deadlines, contact with the instructor, etc., rests with the student.
- 3. If the agreed-upon date passes without the necessary assignment being completed, or an extension being approved by the Associate Dean, a failure is given for the course.
- 4. The imposition, if any, of a grade penalty because of the delay in completing the assignments is determined by the instructor. The student should be apprised of this in the original discussion around the INCOMPLETE. This should be included in the written agreement referred to in (1) above.

To have the grade of Incomplete for this course removed from my transcript, I shall complete the following work:

Paper _____ Exam _____ Other _____

Field Assignment _____
(Hours per Week) (Number of Weeks)

This work will be completed by _____

I understand that the grade assigned to this work will/will not reflect a penalty for its delay.

If I fail to complete the assignment by the agreed-upon date, I understand that the course grade of INCOMPLETE will be changed to FAILURE.

Date signed _____ Signature _____
(Student)

Signature _____
(Faculty)