

Change of Grade

STUDENT NAME

CLASSIFICATION

STUDENT NUMBER

CHANGE OF GRADE

REMOVAL OF AN "I" GRADE*

COURSE AND NUMBER

SECTION

for

SEMESTER AND YEAR

from

PREVIOUS GRADE

to

NEW GRADE

Reason for Grade Change: _____

This form should NOT be given to a student to be returned to this office.
Please return it to the Office of the Registrar in person, by mail, or by email.

INSTRUCTOR SIGNATURE

DATE (MM/DD/YYYY)

DIVISION HEAD SIGNATURE

DATE (MM/DD/YYYY)

* Signature of Division Heads and Deans are required for "I" grades

VICE CHANCELLOR FOR ACADEMIC AFFAIRS SIGNATURE

DATE (MM/DD/YYYY)

Recorded – Office of Student Records: _____