

**Change of Grade**

\_\_\_\_\_  
STUDENT NAME

\_\_\_\_\_  
CLASSIFICATION

\_\_\_\_\_  
STUDENT NUMBER

CHANGE OF GRADE

REMOVAL OF AN "I" GRADE\*

\_\_\_\_\_ for \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
COURSE AND NUMBER      SECTION      SEMESTER AND YEAR      PREVIOUS GRADE      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: \_\_\_\_\_