



# Grade Change Form

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student’ Name |  | A-Number |  | Department |
| Instructor’s Name | Student’s Major | | | |

**Grade Change**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Semester | Year | Course# | Section | Course Title | Credit Hours | Grade From | Grade to |
|  |  |  |  |  |  |  |  |

Removal of Incomplete (“I”) Date Contract Completed: Correction of Grade (Attach copy of grade book and/or attendance record.)

Explanation Required – Reason for Requesting Grade Change:

Instructor’s Signature Date

# APPROVED:

Dean’s Signature Date

# RECEIVED:

Admissions & Registration Department Date