



This form is to be completed by the instructor only.

Student @ ID:

CRN:

YEAR: _____

☐ Change to correct error
 ☐ Final grade for "Incomplete" or "Grade in Progress"

☐ Change "Not Reported/NR" grade to letter grade
 ☐ Student's name did not appear on grade roster

☐ Other: _____

Explanation:

Date:

Printed Name of Instructor: _____



ADMISSIONS & ENROLLMENT SERVICES |
2800 S LONE TREE ROAD
FLAGSTAFF, AZ 86005
PHONE: 928-226-4299
FAX: 928-226-4033
EMAIL: enrollment.services@coconino.edu

OFFICE OF ADMISSIONS & ENROLLMENT SERVICES ONLY:

Signature of Registrar: _____

Date: _____

Processed by: _____

Date: