CHANGE OF GRADE FORM

This form is to be completed by the instructor only.

STUDENT NAME: ___________________________  Student @ ID: ____________

COURSE: ___________________________  CRN: ____________

SEMESTER: □ FALL  □ SPRING  □ SUMMER  YEAR: ____________

REASON FOR GRADE CHANGE:
□ 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: ____________________________________________

GRADE TO BE RECORDED: ________

Explanation:
_________________________________________________________________________________________________

_________________________________________________________________________________________________

Signature of Instructor: ___________________________  Date: ____________

Printed Name of Instructor: ___________________________

OFFICE OF REGISTRATION & ENROLLMENT SERVICES ONLY:

Signature of Registrar: ___________________________  Date: ____________

Processed by: ___________________________  Date: ____________