

Grade Change Request

Instructions: This form is to be used by professors who wish to request a grade change. Return completed form to the Registrar's office.

Please Print Clearly				
Student Information:				
Student Last Name:	Student First Name:			
Student ID Number:				
Class Information:				
Course ID (ex. SCI 101):		Section (<i>ex. A</i>):	Semester (ex. Fall 2010):	
Course Title (ex. Biology I):				
Professor of Record:				
Previous Letter Grade:		New Letter Grade:		
Reason for grade change:				
Required Signatures:				
Professor:				
	Signature			Date
Registrar:	Signature			Date
	oignature			17410
		OFFICE USE ONLY		

Entered by: _____ Date: ____