

GRADE CHANGE REQUEST

Student's Name: _____ Date: _____

Course: _____
(Dept.) (No.) (Title)

Term & year course was offered: _____

Once grades have been submitted to the University Registrar, they may be changed for one of three reasons:

1. to change an incomplete to a letter grade
2. to correct a mathematical* or clerical error, or
3. to accommodate a change resulting from an appeal. (Attach appeal documentation)

***If the grade was entered incorrectly due to a mathematical error, you must provide supporting documentation.**

All grade changes must be initiated by the student within the first 14 days from receipt of grades, please check with Registrar's Office for official date. Grade change must be turned in by instructor and approved by the Registrar within the first 15 days of the following long semester.

REASON FOR CHANGE:

Grade originally assigned: _____ Grade changed to: _____

Instructor's signature: _____ Date: _____

Approved: _____ Date: _____
(Registrar/Academic Dean)

Change recorded: _____
(Date) (Initials)