



Change Grade Form

Fill out this form and submit back to the Office of the Registrar:

Applicable term: Summer _____ Fall _____ Spring _____

Student Name

Student ID

Course Dept & No.

Section

Course Title

CRN

Initial grade: _____

Final grade: _____

Justification for change: _____

Except in the case of removing an incomplete grade, a reason/justification such as "made up missing work/assignments" is **not** an acceptable rationale for a change.

Required Signatures:

Instructor Signature

Date

Registrar Signature

Date

<p>Action taken: Change made in Banner</p> <p style="text-align: right;">_____ Initials _____ Date</p>
