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 __________

Action taken: Change made in Banner

Initials ___________ Date ___________