

This form is for internal use only and must be submitted directly to the Office of the Registrar by faculty. Grade change requests submitted by students will not be accepted. Students wishing to appeal a grade must follow the policies outlined in the Academic Catalog found [HERE](#).

Grade changes are not permitted for assignments submitted after the end of class, unless the student has an approved Incomplete Grade Contract. These requests will be reported to the Associate Dean of your respective program.

SECTION I: STUDENT/COURSE INFORMATION

Student Name:		Program of Study:		Level: <input type="text" value="Select"/>	Discipline: <input type="text" value="Select"/>	
Instructor Name:				Date of Request:		
Term/Year (e.g. Fall, Fall 1, or Fall 2 2019)	DEPT (e.g. HD)	Class # (e.g. 500)	Section # (e.g. 1P)	Class Title		Units
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>

SECTION II: GRADE CHANGE INFORMATION

Original Grade: <input type="text"/>	Final Grade: <input type="text"/>
Reason for grade change: Academic Standards Committee decision to change grades from "W" to N/A	
<input type="checkbox"/> Resolution of Incomplete Grade	<input type="checkbox"/> Result of approved grade appeal
<input type="checkbox"/> Data entry error	<input type="checkbox"/> Miscalculation
<input type="checkbox"/> Missing Grade	<input type="checkbox"/> Other: <input type="text"/>
Additional Comments: <input type="text"/>	

SECTION VI: APPROVAL

Instructor Signature: 	Date: <input type="text"/>
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SECTION VII: PROCESSING

Registrar Initials: <input type="text"/>	Date Received: <input type="text"/>	Date Processed: <input type="text"/>
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