



REQUEST TO CHANGE A GRADE

TO: Martha Barnett, Registrar

FROM:

Instructor's Name (Printed)

Instructor's Signature

Date

Erica Bell has my permission to change the following grade(s) on my behalf.

Student Name: _____ Student Number: _____

Course Name/Number: _____ CRN: _____ Semester/Year: _____

Please change the grade from** _____ to _____.

(All I's or F's Must Include Last Date of Attendance _____)

Reason: _____

***Time limit for changing Incomplete (I) grades is 2 regular semesters. Other grades may be changed after 2 regular semesters with written permission of both department chair AND dean.*

INSTRUCTIONS:

Please complete this form and fax to Erica Bell, Regional Centers and Online Programs 731-881-7984.

(Note: If you need to change grades for an entire section, you may attach a list.)