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. Course Title CRN Section 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 **no**t an acceptable rationale for a change. **Required Signatures:** Instructor Signature Date Registrar Signature Date Action taken: Change made in Banner Initials Date