Authorization
For Change
Of Grade

Student’s Name ____________________________
First Middle Init. Last

Student EmplID# ____________________________

Course Dept., Number, and Section ____________________________
(Example-STD 101-01)

Instructor ____________________________

Semester and Year Course was Taken ____________________________ 20

Grade ____________________________
Previous ____________________________ New ____________________________

Reason for Change of Grade ____________________________

Instructor’s Signature ____________________________ Date ____________________________

Division Dean’s Signature ____________________________ Date ____________________________

A Grade of “W” must be approved by the Vice President of Instruction
and Student Services

Vice President of Instruction and Student Services ____________________________ Date ____________________________

Records Office Use:
Change of Grade Recorded on ____________________________ Date ____________________________ by Registrar ____________________________

Go/Manage Student Records/Manage Academic Records/Use/Enrollment Request/Enrollment Request 1/Add