



FACULTY USE ONLY

CHANGE OF GRADE

_____		_____
Student Name		Student ID
_____	_____	_____
Course Number	Course Title	Semester

Instructor Name		

- ☐ Student completed the Incomplete course and received the final grade of _____.
Provost approval is not required for grade submission of an Incomplete.

~OR~

- ☐ The final grade should be changed from _____ to _____. This grade change is due to:
- ☐ Data entry error
 - ☐ Miscalculation of final grade
 - ☐ Other:

_____	_____	_____	_____
Instructor Signature	Date	Provost Approval	Date

*Instructor: Submit this form to the Registrar's Office.
The Registrar's Office will submit the form to the Provost for approval of grade changes other than an Incomplete.*