



Change of Grade Form

TO: Elizabeth Aguilar-Villarreal
Director of Enrollment Services

RE: Grade Change

Please change the grade for _____, _____
(Name) (Banner ID)

from _____ to _____. This grade is for _____.
(Course & Number) (Section) (CRN)

taken in _____.
(Semester/Year)

The change is necessitated because:

Instructor/Please Print

Signature of Instructor

Date

APPROVED:

Chairperson

Date

Dean

Date

***Exception:** Chair may recommend and approve change if adjunct faculty member is not available and grade change is justified. Approval by VPAS is also required in this case.

Vice President of Academic Success

Date