Grade Change

This form is not to be used to change a grade to "W". Please use the Withdrawal Form						
Student's SSN:		EmplID:				
		First Name			MI Jr.,3rd	
(1	Please check th	Class Info	ormation or accuracy on y	our class roll)		
Class ID Nbr.	Subject	Class Nbr.	Section	_	Campus	-
Semester of enrollment in	class:					
FALL TERM (Aug - Dec) 20	5	SPRING TERM (Jan	- May) 20	SUMMER TER	.M (May - July	/) 20
Grade: Original	Fina	I				
Instr	uctor's Signature			Date		
Scho	ool Dean's Signatur	e		Date		
Adm	issions and Record	ls		Date		
Comments:						
		For A & R Off	ice Use Only			
Processed by:				Date:		

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