



REQUEST TO CHANGE GRADE OPTION

Last Day to Change Grade Option: Friday, September 18, 2009

This form must be submitted in person with the signature of the instructor(s) to the University Center at the School of Continuing and Professional Studies.

Student Name _____ EMPL ID # _____

First Course

Course Subject	Course Number	Class Number (5 digits)	Title of Course	Current Grading Option	Grading Change Requested
Reason for Change:					
Student Signature:				Date:	
Instructor Signature:				Date:	

Second Course

Course Subject	Course Number	Class Number (5 digits)	Title of Course	Current Grading Option	Grading Change Requested
Reason for Change:					
Student Signature:				Date:	
Instructor Signature:				Date:	

Office Use Only. Received & Approved _____ Date _____