



Retroactive Change Form

Student's Name _____ Student ID No. _____

LAST

FIRST

MIDDLE

This student is (check all that apply): NCAA student athlete International student Receiving VA benefits

DROP: _____

Semester

Course Number - Section

Course Title

Cred. Hrs.

____ This student did not attend class. This student is considered as never enrolled.

____ This student attended this class. The official date of withdrawal should be *_____. The student should receive a grade of *_____.

*Federal regulations require an official date of withdrawal (the last test date or assignment if you do not have acceptable attendance records). A withdrawal date and grade must be assigned for this form to be accepted.

ADD: _____

Semester

Course Number - Section

Course Title

Cred. Hrs.

This student attended my class and should receive a grade of _____. The student will be charged any tuition and related fees for the class.

CHANGE OF GRADE: (This form must be used for a request for a change of grade after the passing of one long semester. Such a request requires all of the signatures below and an explanation must be attached.)

Semester

Course Number - Section

Course Title

Cred. Hrs.

This student was assigned a grade of _____. The student's correct grade for the class is a _____.

Required Signatures:

Instructor _____ Date _____

Department Chair _____ Date _____

Dean _____ Date _____

Student Financial Services (drops/adds only) _____ Date _____

Provost _____ Date _____