



Grade Change Form

I wish to make a grade correction for the student named below.

I wish to change an "I" (Incomplete grade) for student named below.

Name of student: _____ TSC ID: _____

Course Name _____		
Course # _____	Section: _____	Year: _____
Fall Semester	Spring Semester	Summer Session I
Fall Mini I	Spring Mini I	Summer Session II
Fall Mini II	Spring Mini II	Summer Session III
Grade change from: _____ to _____		

Reason for grade change. (Please be specific.)

Instructor Name (Print): _____

Signature of Instructor: _____ Date: _____

This change has been brought my attention.

Signature of Dean: _____ Date: _____