



800 Wheatley Street, Americus, GA 31709-4379

# CHANGE OF CLASS GRADE FORM

TO: Registrar's Office

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Please make the following grade change:

Student Name: \_\_\_\_\_

gswID#: \_\_\_\_\_

CRN: \_\_\_\_\_ Course: \_\_\_\_\_

Semester/Year: \_\_\_\_\_

FROM	TO	# Credit Hours
(Letter Grade)	(Letter Grade)	

Reason:

Date Submitted: \_\_\_\_\_

Signature of Instructor

Approved: \_\_\_\_\_

Department Chair/Dean, when applicable

Note:

1. According to the Faculty Handbook: A completed copy of the form "Incomplete Grade Assignment" must be submitted to the academic dean/department chair at the time a grade of Incomplete (I) is assigned, and a copy must be attached to the "Change of Grade" form when the "I" is cleared.

Change of Class Grade forms must be included with this documentation.

2. Two signatures are required on this form. Instructors who are Department Chairs must have the form approved by the Dean.