Office of Extended Campus and Online Studies

REQUEST TO CHANGE A GRADE

TO:	Brandy Cartmell, Registrar			
FROM:				
	Instructor's Name (Printed)	Instructor's Sign	ature	Date
Erica Bell/I	Derrick Head/Tommy Cates have my	y permission to chang	e the following grade/s or	n my behalf.
Student Name:		Student Number:		
Course Name/Number:		CRN:	Semester/Year:	
Please chan	ge the grade from** to	(All I's of F's Mu	ist Include Last Date of A	Attendance)
Reason:				
	it for changing Incomplete (I) grades ith written permission of both depar	e e	e .	hanged after 2 regular

Instructions: Please complete this form and fax to Erica Bell, ECOS (731-881-7984).

(Note: If you need to change grades for an entire section, you may attach a list.)