

UNIVERSITY OF SOUTH ALABAMA

CHANGE OF GRADE/SYMBOL FORM (A, B, C, D, F, F*, S, U, U*, N/I, X, P)

INSTRUCTIONS: PLEASE SEND FORM TO THE REGISTRAR'S OFFICE (MH 1100)

CRN	SUBJECT	COURSE	SECTIO	ON				TERM
INSTRUCTOR				COURSE TITLE			CREDIT HOURS	
			1					
STUDENT NAME				STUDENT ID		ASSIGNE GRADE (SYMBO	OR	AMENDED GRADE OR SYMBOL
				J00				
				J00				
				J00				
				J00				
				J00				
			OL CHANG	GE (F	PLEASE SPECI	FY)		
Error in Recording Grade								
Error in Evaluation of Grade								
Student Completed Course Work (I, X, P)								
Other (Ple	ease Specify)							
INSTRUCTOR'S SIGNATURE						DATE		_
CHAIR'S SIGNATURE						DATE		
DEAN'S SIGNATURE					•	DATE		
FOR GRAD	UATE STUDE	NTS ONLY:						
GRADUATE STUDIES DIRECTOR'S SIGNATURE						DATE		
GRADUATE SCHOOL DEAN'S SIGNATURE					-	DATE		