Glendale Community College Office of Admissions and Records

STUDENT'S CHANGE OF GRADE REQUEST

		Date
Student Name:		Student ID #
Course Name	Ticket #	Term and Year
Instructor Name		
	it be submitted to the Adm ne one during which the co	d it cannot be used to change a nissions & Records Office by the ourse was taken. See the catalog
CHANGE OF GRADE REQ	UEST: From	To
Student's reason for requesti	ing change:	
Student Signature:		Date
Instructor's Response (Requ	ired):	
	DENIED - Instruct	or initials required
Instructor Signature:		Date
Division Chair Signature:		Date
Send the complete	ted form to the Admissio	ns & Records Office
Admi	ssions and Records Office	Use Only
Permanent Record Posted		Student Notified