VERMONT TECH

Office of the Registrar

CHANGE OF GRADE

Student Name:		ID:	
Term:			
Course number & Section:			
Course Title:			
Instructor:	(please print)		
Grade previously recorded:			
Grade to be recorded:			
Reason for this change:			
Signature of Instructor:		Date:	
Comments:			
Signature of Registrar or Assistant Registrar:		Date:	
	OFFICIAL USE ONLY		
STAC updated: Date:			
STAC checked: Date:	Init.:		
Cc. Current Advisor Studen	t 🗆 File		06/28/13