VERMONT TECH

Office of the Registrar

Fall 2020 REQUEST FOR CHANGE OF GRADE TO P/NP

Student Name:		ID:
Program:	Academic Advisor:	
riogram.	Academic Advisor.	
Contact your academic advisor degree. Requests need to be business on December 17 , 20 CANNOT be reversed.	submitted to registrar@vtc.	edu no later than the close of
Courses to change gra	de:	
Course section to change	from letter grade to P/N	P <u>Instructor</u>
Student Acknowledgement	t (required)	
I have discussed making the academic advisor or departm		for the sections above with my Department Chair
Initial and date		
I confirm that I have reviewed website:	d the Pass/No Pass (P/N	P) <u>FAQs</u> page published on the
Initial and date		
OFFICIAL USE ONLY		
	e: Init:	
Grades Checked: Date Copy sent to: Department Chair Date	e: Init: :	
TOP, CONT. CO. Dopartinont Onail Date	· mat	