

Grade Change Form

Office of The Registrar

The Graduate Center

The City University of New York

365 Fifth Avenue, New York, NY 10016



COURSE INFORMATION:

Semester

CRN Code

Dept.

Course No.

Credits

Course Title

Student's Name

ID No.

CHANGE:

Temp. Grade

TO:

Final Grade

NAME OF COURSE INSTRUCTOR (Please Print)

REASON FOR SUBMISSION OF FORM:

SIGNATURES:

Course Instructor

Executive Officer

V.P. Student Affairs (For Grades Over 1 Year Old)