

CHANGE OF GRADE CARD
Western Kentucky University

STUDENT'S NAME: _____
Last First Middle

WKU ID: _____

INSTRUCTIONS: To be completed and submitted to the Registrar's Office by the instructor of the course. Student-delivered changes cannot be accepted.

COURSE/TITLE: _____
CRN Required Subject Course No. Section No. Hrs. Cr.

DEPARTMENT: _____ SEMESTER TAKEN: _____ DATE WORK COMPLETED: _____

CHANGE FROM GRADE OF: _____ TO: _____ REASON FOR CHANGE: _____

Office Use Only

DATE RECORDED: _____
RECORDER'S INITIALS: _____

INSTRUCTOR'S SIGNATURE

DEPARTMENT HEAD'S SIGNATURE

Revised January 2018