

*Siena Heights University*  
Adrian, Michigan 49221  
(517) 264-7121

**CHANGE OF GRADE FORM**

NAME \_\_\_\_\_ ID # \_\_\_\_\_  
Last First Initial

ADDRESS \_\_\_\_\_  
Street Address

\_\_\_\_\_ City State Zip

COURSE INFORMATION

DEPARTMENT AND NUMBER: \_\_\_\_\_

TITLE: \_\_\_\_\_ Semester Hours \_\_\_\_\_

SEMESTER AND YEAR TAKEN: \_\_\_\_\_

\_\_\_\_\_ Original Grade \_\_\_\_\_ New Grade

NOTE: A credit/no credit cannot be changed to a letter grade.

Reason for Change: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Instructor Date

Received by the Registrar's Office \_\_\_\_\_