CHANGE OF GRADE

This form must be turned in to the Office of Records by the faculty via in person, or scanned and emailed to the Office of Records via the faculty member’s Millsaps email address.

Name of Student: ___________________________________________ ID #: __________________________________________

A change of grade from ___________ to ___________ in ____________________________________________________________ (Department and Course #)

incurred in ________________________________________________________________________________________________ (Term and Year)

Reason for change: __________________________________________________________________________________________

____________________________________________________________________________________________________________

Signature of Instructor: __________________________ Printed Name: _________________________________________________

Date work completed by Student: _________________ Date new grade was reported to Records Office: ________________

Approved by Academic Dean: __________________________ (The Academic Dean’s signature is not required for changes of grades from an incomplete to a letter grade.)

____________________________________________________________________________________________________________

FOR OFFICE OF RECORDS USE ONLY:

<table>
<thead>
<tr>
<th>Before grade change</th>
<th>After grade change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Term GPA:</td>
<td>Term GPA:</td>
</tr>
<tr>
<td>Cumulative GPA:</td>
<td>Cumulative GPA:</td>
</tr>
<tr>
<td>Academic Standing:</td>
<td>Academic Standing:</td>
</tr>
</tbody>
</table>

Change made in Office of Records by Registrar (initial and date): ____________________

If MS resident, change recorded to IHL by Assistant Registrar (initial and date): ____________________

Form last updated 4/25/2017