

X-ID #: \_\_\_\_\_



Lake Sumter  
State College

# CHANGE OF GRADE

\_\_\_\_\_  
Name: Last, First

\_\_\_\_\_  
Course Prefix/Num.

\_\_\_\_\_  
CRN#

\_\_\_\_\_  
Instructor

Change grade from \_\_\_\_\_ to \_\_\_\_\_

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

Select Term:

Fall

Spring

Summer A/AE

Summer B

Year: \_\_\_\_\_

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean (Adjunct Instructors Only)

\_\_\_\_\_  
Date

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