

# CHANGE OF GRADE REPORT

EL PASO COMMUNITY COLLEGE  
P.O. BOX 20500 EL PASO, TEXAS 79998

## CHANGE OF GRADE REPORT

### To Admissions/Records

From: \_\_\_\_\_, Instructor Date Submitted \_\_\_\_\_

CRN #

Course Prefix

Course #

Semester

Year

The initial grade of \_\_\_\_\_ for this student is to be converted to a grade of \_\_\_\_\_.

Reason: \_\_\_\_\_ Original Grade Given In Error \_\_\_\_\_ Incomplete Work Submitted & Evaluated.

\_\_\_\_\_ Other: (Please Specify) \_\_\_\_\_

\_\_\_\_\_  
Instructor's Signature

\_\_\_\_\_  
Dean's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Name (Print-Last Name First)

\_\_\_\_\_  
Student ID#

\_\_\_\_\_  
Address

### ADMISSIONS/RECORDS USE ONLY:

Date Received: \_\_\_\_\_

Date Processed: \_\_\_\_\_ By \_\_\_\_\_

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

NOTE: Submit all copies to the Admissions/Records Office. The Instructor copy will be returned after processing is completed.

White - Records Green - FA/VA Yellow - Student Pink - Dean Goldenrod - Instructor

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The Instructor copy will be returned after processing is completed.**