



GRADE CORRECTION FORM

OFFICE OF THE REGISTRAR
Prairie View A&M University
Prairie View, Texas 77446

(Please TYPE)

Student's Name : _____ SID No. : _____
Last First MI

Instructor Requesting Change : _____ Course & No. : _____

Course Title : _____ Semester & Year : _____

Final Grade Initially Awarded : _____ Final Grade Changed To : _____

JUSTIFICATION

Supporting Documentation of Reason for Grade Change Must Be Attached

	Instructor's Signature	Date
_____	Approved	Disapproved
Head of Department		
_____	Approved	Disapproved
Dean of College		
_____	Approved	Disapproved
Vice President/Academic Affairs		

REGISTRAR'S OFFICE USE ONLY

A review of the student's registration revealed that the student (did)(did not) enroll in the course in question.

Reference Number : _____ Section Number : _____

Current Record Review By : _____ Date : _____

REGISTRAR'S REVIEW

	Change Grade	Hold Change Grade*

Registrar's Signature		
*Reason : _____		

Correction Made By : _____ Date : _____