



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

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 : _____