CHANGE OF GRADE AND/OR REMOVAL OF INCOMPLETE

Last Nai	me			First Nar	ne Middle Initia	al	Student I.D. Number	Instructor's Signature	Date
Dept.	Course	Section	Credits	Title of	f Course			Department Chair	Date
Change grade from		m Ch	Change grade to		Reason for Change			Student's College Dean	Date
Semeste	er/Year C	ourse Ta	aken					UVA	
Undergraduate CASSH CSI CBA SO					ege Graduate □ CASSH □ SOE □ CSH □ CBA			UW-LA CF	