

# Grade Change Form

The Dean, Director, or Designate authorizes the following grade or grade change.

## STUDENT INFORMATION

## STUDENT NUMBER

Last Name	First Name																				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> <td style="width: 20px; border: 1px solid black;"> </td> </tr> </table>																					

## STUDENT CURRICULA

## TERM

Student's Primary Faculty or Academic Unit <input type="checkbox"/> AR <input type="checkbox"/> BU <input type="checkbox"/> CE <input type="checkbox"/> CT <input type="checkbox"/> ED <input type="checkbox"/> ES <input type="checkbox"/> GS <input type="checkbox"/> KI <input type="checkbox"/> MP <input type="checkbox"/> NU <input type="checkbox"/> SC <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SA	Student's Campus or Federated College <input type="checkbox"/> U of R <input type="checkbox"/> Campion College <input type="checkbox"/> Luther College <input type="checkbox"/> First Nations Univ of Canada	<input checked="" type="checkbox"/> Check only one <input type="checkbox"/> Winter (Jan-Apr)    ⤴ Year: _____ <input type="checkbox"/> Spring/Summer (May-Aug)    ⤴ Year: _____ <input type="checkbox"/> Fall (Sep-Dec)    ⤴ Year: _____
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## COURSE INFORMATION

## GRADE INFORMATION

CRN	Subject	Course Number	Section	Credit Hours	* Current Grade	** Revised Grade
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\*\* All percentage values use multiple digits (00-100%)

## GRADE CHANGE REASON

Check only one     If you are unsure which reason is appropriate please add a comment below:

<input type="checkbox"/> <b>IE Arithmetical Error</b> Mistake of calculation	<input type="checkbox"/> <b>RR Student Re-Registered in Class</b> DOME indicator Grade Change required (drop in W grade period; re-registered)	<input type="checkbox"/> <b>IR Procedural Grade Appeal</b> Student requested a calculation of grade review by course instructor	<input type="checkbox"/> <b>DC Deferred Exam now Completed</b> *DE grade in Banner - formal deferral approved by Dean (or designate)	<input type="checkbox"/> <b>IC Incomplete now Completed</b> *IN grade in Banner - formal deferral approved by Dean (or designate)	<input type="checkbox"/> <b>RE Substantive Grade Appeal</b> Student submitted an <i>Appeal of Grade</i> form with documentation and fee
<input type="checkbox"/> <b>AP Appeal</b> Application for Grade Adjustment (AGA) submitted to the Registrar's Office	<input type="checkbox"/> <b>CR Correct Registration Error</b> Application for Grade Adjustment (AGA) submitted to the Registrar's Office	<input type="checkbox"/> <b>IT NR Interim Admin Grade Roll</b> NR grade was entered in DOME for one of the following reasons: <ul style="list-style-type: none"> <li>• Grade delayed for reasons intrinsic to course</li> <li>• Graduate student initiated formal deferral</li> <li>• Web delivered course final exam now received</li> <li>• <i>Student Accessibility</i> accommodation</li> </ul>	<input type="checkbox"/> <b>XF Disciplinary Ruling</b>	<input type="checkbox"/> <b>SF See Official Student File</b> Documentation required	
<input checked="" type="checkbox"/> <b>Comment:</b>					

## SIGNATURES OF APPROVAL

Campus or Federated College offering the class		<input checked="" type="checkbox"/> Check only one
<input type="checkbox"/> University of Regina	<input type="checkbox"/> Campion College	<input type="checkbox"/> First Nations University of Canada
		<input type="checkbox"/> Luther College
Signature of Instructor	DD-MMM-YYYY	⤴ Forward this form to the course department.
Signature of Department Head or Designate - offering the class	DD-MMM-YYYY	<input checked="" type="checkbox"/> If there is no course department: GR level student - forward this form to FGSR for signature. UG level student - forward this form to course faculty for signature.
<u>GR level student</u>	⤴ ⤵	<u>UG level student</u>
Signature of Dean or Designate - FGSR	DD-MMM-YYYY	Signature of Dean or Designate - offering the class
DD-MMM-YYYY		DD-MMM-YYYY
⤴ FGSR - scan and email the form to the Registrar's Office at <a href="mailto:UofR.Grades@uregina.ca">UofR.Grades@uregina.ca</a>		⤴ UG - scan and upload the form to URDocs except CCE. CCE - scan and email the form to the Registrar's Office at <a href="mailto:UofR.Grades@uregina.ca">UofR.Grades@uregina.ca</a>