



**Saint Xavier**  
UNIVERSITY

Office of Records and Registration

## CHANGE OF GRADE

Today's Date \_\_\_\_\_ Term of Enrollment \_\_\_\_\_

Student's Name \_\_\_\_\_ ID# \_\_\_\_\_

Subject/Course#/Section \_\_\_\_\_

Course Title \_\_\_\_\_

Change grade from \_\_\_\_\_ to \_\_\_\_\_

Reason for change \_\_\_\_\_

No reason required for INCOMPLETE

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

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

Recorded by \_\_\_\_\_