

OFFICE OF THE REGISTRAR 601 S. Church Street Winston-Salem, NC 27101 336/721-2670

GRADE CHANGE FORM

This form serves as the official method to change a grade or enter a grade. This form will be accepted:

- as an attachment from an official secure Salem College email address from the instructor of record or the division chair
- in person in the Registrar's Office during regular business hours
- via campus mail in a sealed envelope with the faculty member's signature across the seal

Note: A faculty member who wishes to change a grade a calendar year or more after the grade was first submitted must present the grade change request in writing to the Vice President of Academic Affairs and Dean of the College, explaining the reason for the change and the reason for the delay.

Student's Name:	ID#	:
Course and Number:		
Term/Year Course was taken:		
Grade Change:		
The grade of	reported for the above course should be changed t	0
Reason for the ch	ange:	
Comments:		
Instructor Name (print)	Instructor Signature	Date
	For Office Use Only	
	Date Grade Entered Initials	
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