# Student Grade Change Request

**Student Name:** Last First MI SID Date

**Instructor’s Name:** (please print) Department Course No. Section Item No. Enrolled Quarter

- Fall
- Winter
- Spring
- Summer

Year: 

Grade changes are allowed through one quarter following the end of the quarter in which the course was taken. Change requests must be initiated by the student and approved by the Instructor of Record of the name course.

**Student Petition Request: Arguments for Grade Change**

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**Student signature and date**

Grade requested

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